

**FIVE (5) DAY TERMINATION/CANCELLATION NOTICE**

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**TO:** Scorpion Fitness Inc. and Scorpion Club Ventures, LLC ("Tenant") and John Shams ("Guarantor").

**PREMISES:** All rooms/areas of a portion of the ground floor, mezzanine, and lower level, as shown hatched on the floor plans annexed hereto as **Exhibit A** and incorporated by reference as if fully set forth in length, in the building known as and located at 220 Fifth Avenue, New York, New York 10001.

**LEASE:** dated December 19, 2014, by and between Landlord's predecessor-in-interest, Dino & Sons Realty Corp., as landlord, and Tenant, as tenant. Said Lease being modified by a First Lease Modification Agreement, dated June 30, 2017.

**GUARANTY:** dated December 22, 2014, by Guarantor, as guarantor.

**DATE OF THIS NOTICE:** April 23, 2019.

**PLEASE TAKE NOTICE**, your tenancy in the Premises is hereby terminated effective **May 3, 2019**, pursuant to Article 17 of the Lease, upon the grounds that you failed to comply with a certain Notice of Default, dated May 29, 2018, a copy of which together with proof of service thereof is annexed hereto as **Exhibit B** and incorporated herein with the same force and effect as if fully set forth at length, and a certain Supplemental Notice of Default, dated October 26, 2018, a copy of which together with proof of service thereof is annexed hereto as **Exhibit C** and incorporated herein with the same force and effect as if fully set forth at length. More specifically, you failed to cure certain therein enumerated lease defaults by no later than April 22, 2019.

**PLEASE TAKE FURTHER NOTICE**, that you are hereby required to quit, vacate and surrender possession of the Premises to the Landlord **on or before May 3, 2019**, that being more than five (5) days from the date of service of this Notice upon you, as well as the day on which your term expires. Further and unless you voluntarily vacate the Premises, as aforesaid, the Landlord will commence summary proceedings under the Statute to remove you from said Premises for the holding over after the expiration of your term in the Civil Court of the City of New York, County of New York, and will demand in said proceeding the fair market value of your use and occupancy of the Premises during such holding over, together with an award of its reasonable attorney's fees.

**PLEASE TAKE FURTHER NOTICE**, this Notice is served upon you pursuant to Articles 17, 27, and 31 of the Lease and other applicable provisions of law and/or statutes.

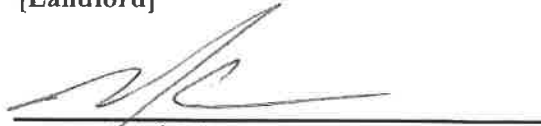
**PLEASE TAKE FURTHER NOTICE**, pursuant to Sections 19, 31, and 51(B) of the Lease, you are responsible for any and all legal expenses and attorneys' fees incurred by the Landlord.

**PLEASE TAKE FURTHER NOTICE**, any response to this Notice must be sent and directed to the below-named attorneys for the Landlord.



Kossoff, PLLC  
Attorneys for Landlord  
By: Joseph Goldsmith, Esq.  
217 Broadway, Suite 401  
New York, New York 10007  
Tel.: (212) 267-6364  
Email: jgoldsmith@kaulaw.com

**220 FIFTH REALTY LLC**  
[Landlord]

  
By: *Matthew Lando*  
Title: *Member*

*Exhibit "A"*

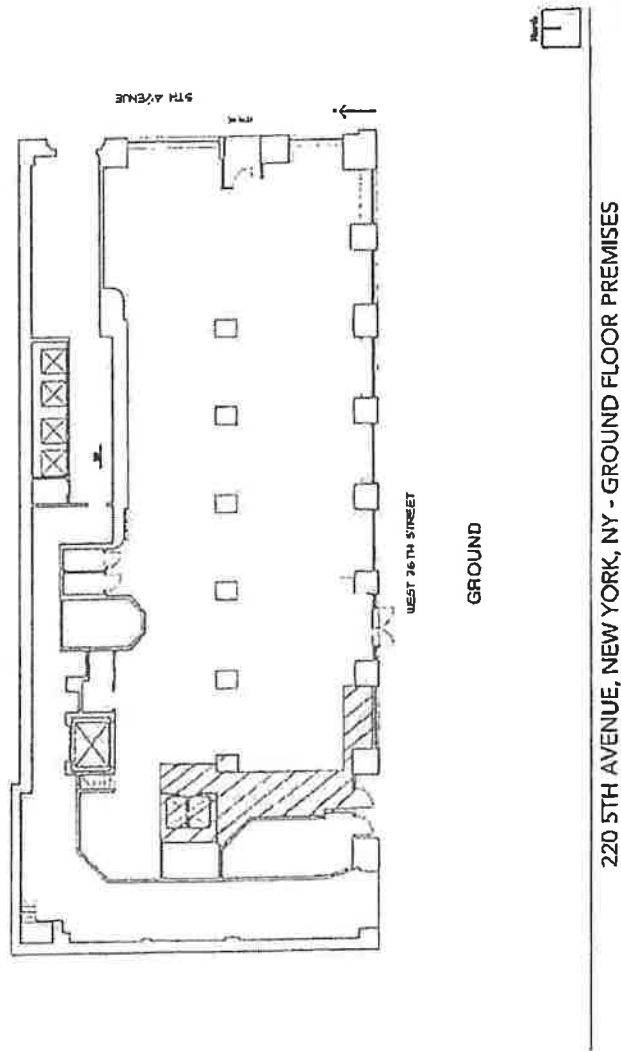
Execution

12/19/2014

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The Demised Premises

Not to scale; all dimensions approximate; subject to actual conditions.



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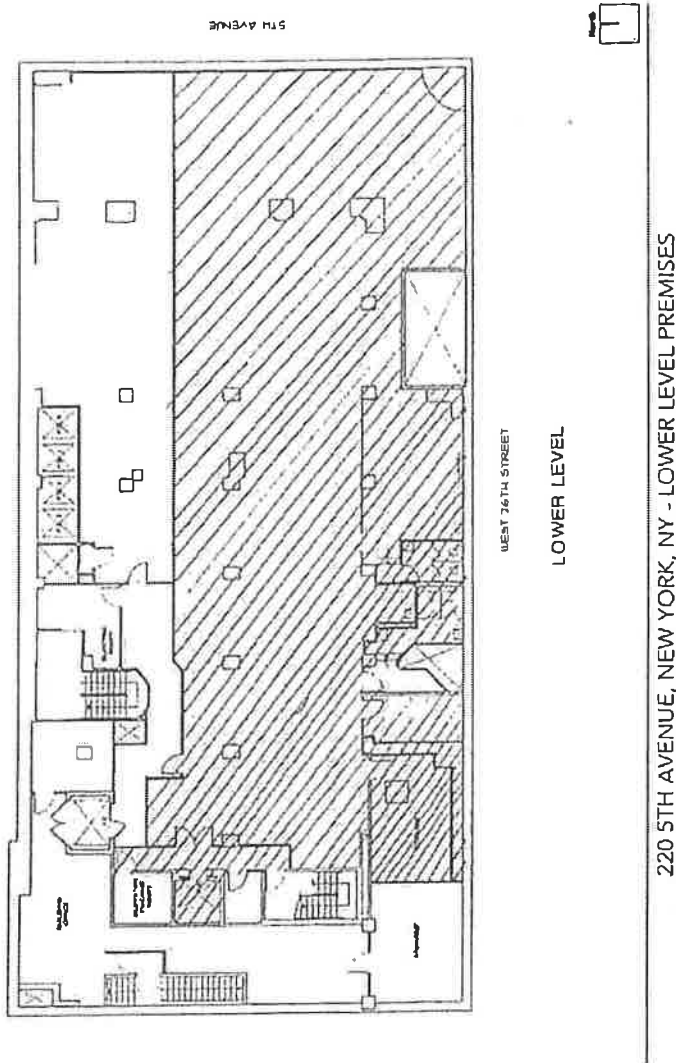
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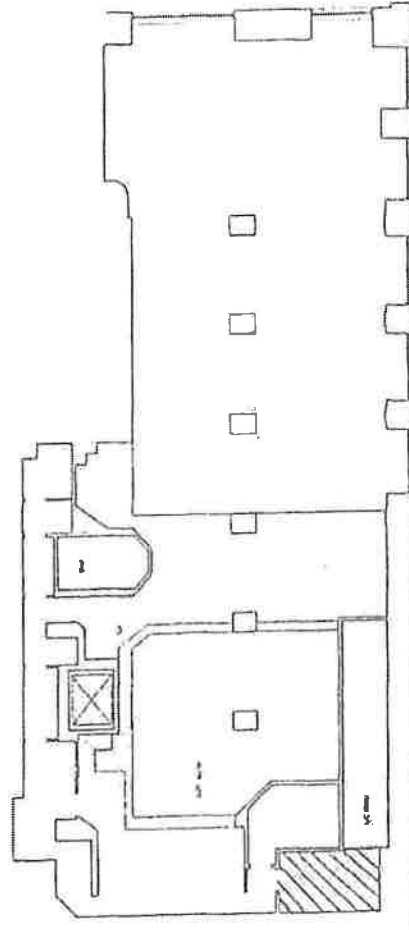
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Please Initial Here. Landlord \_\_\_\_\_ Tenant \_\_\_\_\_

Execution

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MEZZANINE

25

Please Initial Here: Landlord \_\_\_\_\_ Tenant 

*Exhibit "B"*

**NOTICE OF DEFAULT**

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**TO:** Scorpion Fitness Inc. and Scorpion Club Ventures, LLC ("Tenant").

**PREMISES:** All rooms/areas of a portion of the ground floor, mezzanine, and lower level, as shown hatched on the floor plans annexed hereto as **Exhibit 1** and incorporated by reference as if fully set forth in length, in the building known as and located at 220 Fifth Avenue, New York, New York 10001.

**LEASE:** dated December 19, 2014, by and between Landlord's predecessor-in-interest, Dino & Sons Realty Corp., as landlord, and Tenant, as tenant. Said Lease being modified by a First Lease Modification Agreement, dated June 30, 2017.

**DATE OF THIS NOTICE:** May 29, 2018.


**PLEASE TAKE NOTICE** that you are in default of Articles 17 and 31 of the Lease, which provisions deal in pertinent part with your obligations: (a) after five (5) days written notice, to redeposit with Owner any portion of the Security Deposit which Landlord has applied to the payment of any rent and additional rent due and payable; and (b) what actions on your part are deemed defaults under the Lease. More specifically, you have violated and continue to violate the aforementioned provisions of the Lease by failing to pay to the Landlord the sum of \$65,000.00 representing the sum so used, applied, and retained on or before May 20, 2018, that being more than five (5) days after service of a notice upon you, a copy of which with proof of service is annexed hereto as **Exhibit 2** and incorporated by reference as if fully set forth in length.

**PLEASE TAKE FURTHER NOTICE** that, in accordance with Articles 17 and 31 of the Lease, you are hereby required cure such defaults **on or before June 18, 2018**, that being more than fifteen (15) days after service of this Notice upon you, by tendering and paying to Landlord the sum of \$65,000.00 representing the sum so used, applied, and retained, which shall be added to the Security Deposit so that the same shall be replenished to its former amount pursuant to Article 31 of the Lease. Upon your failure to so cure, the Landlord will elect to terminate your tenancy in accordance with Article 17 of the Lease.


**PLEASE TAKE FURTHER NOTICE**, this Notice is served upon you pursuant to Articles 17, 27, and 31 of the Lease and other applicable provisions of law and/or statutes.

**PLEASE TAKE FURTHER NOTICE**, pursuant to Sections 19, 31, and 51(B) of the Lease, you are responsible for any and all legal expenses and attorneys' fees incurred by the Landlord.

**PLEASE TAKE FURTHER NOTICE**, that any response to this Notice must be sent and directed to the below-named attorneys for the Landlord.

  
Kosloff, PLLC  
Attorneys for Landlord  
By: Joseph Goldsmith, Esq.  
217 Broadway, Suite 401  
New York, New York 10007  
Tel.: (212) 267-6364  
Email: jgoldsmith@kaulaw.com

**220 FIFTH REALTY LLC**  
**[Landlord]**

  
Name: Matthew Lembo  
Title: Vice President and Authorized Signatory



*Exhibit "1"*

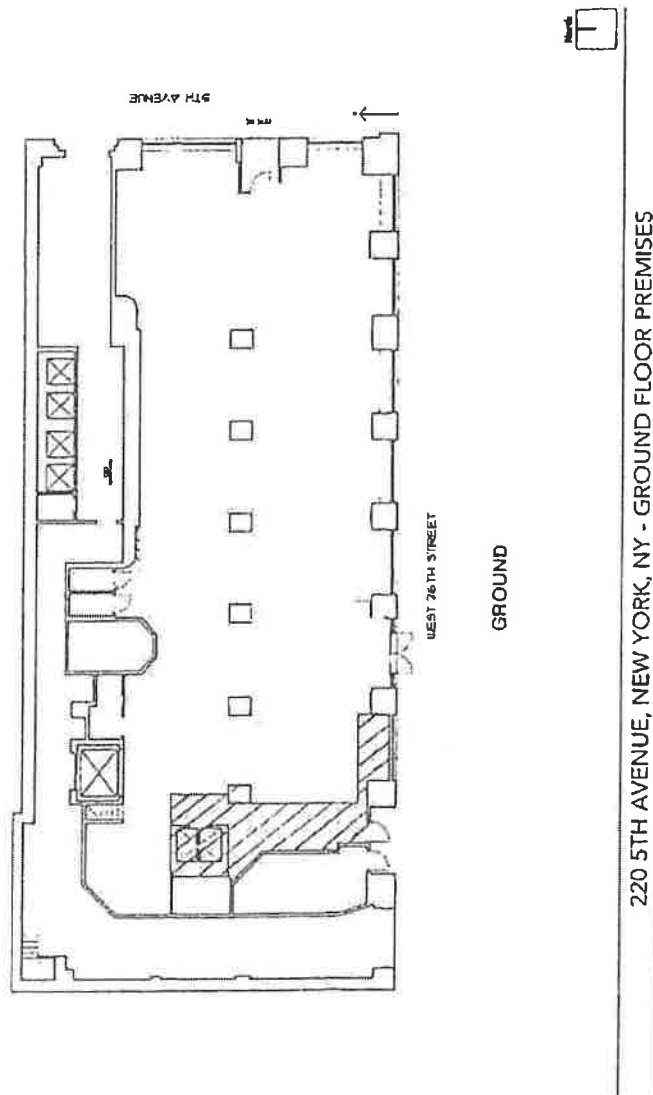
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The Demised Premises

Not to scale; all dimensions approximate; subject to actual conditions.



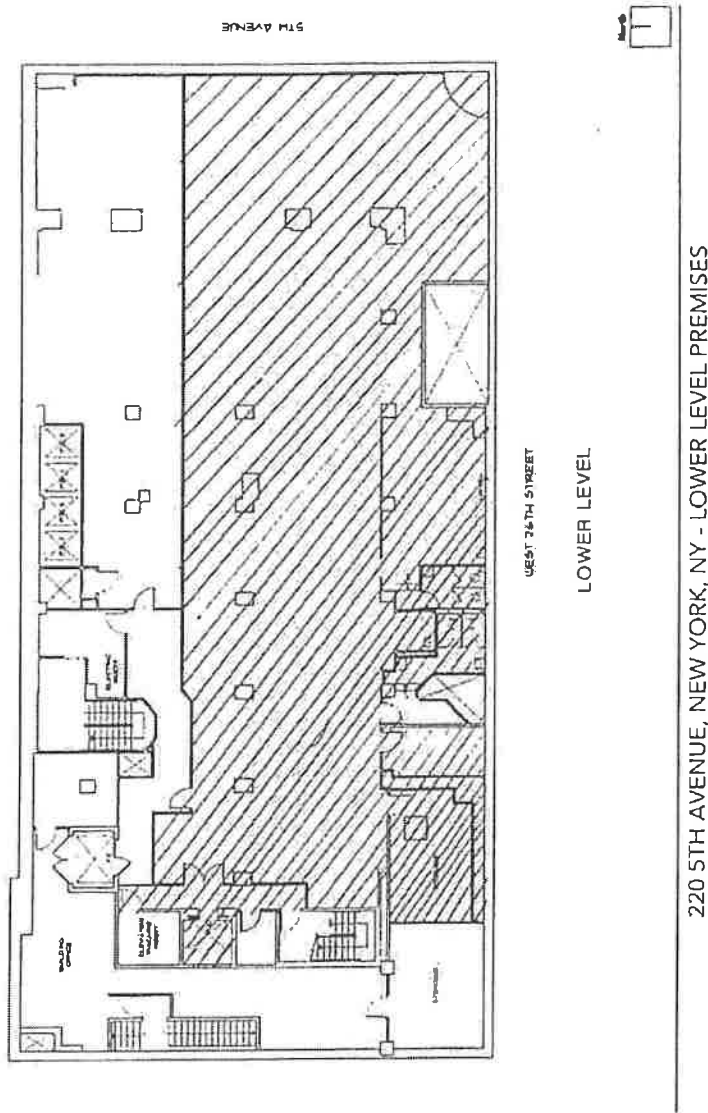
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Please Initial Here. Landlord \_\_\_\_\_ Tenant \_\_\_\_\_

Execution

12/19/2014

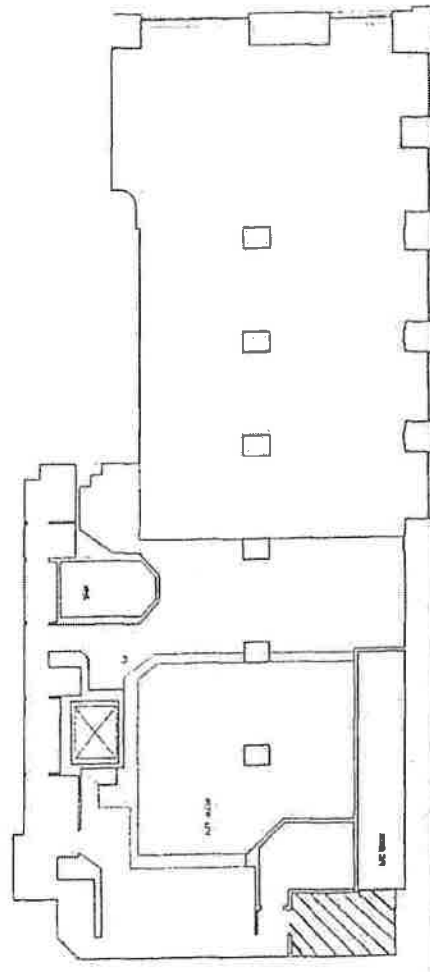
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Execution

12/19/2014

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MEZZANINE

25

Please Initial Here: Landlord

Tenant

A handwritten signature in dark ink, appearing to be "Tenson" or similar, written over the "Tenant" line.

*Exhibit "2"*

**NOTICE AND DEMAND TO REPLENISH AND PAY**

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**TO:** Scorpion Fitness Inc. and Scorpion Club Ventures, LLC ("Tenant").

**PREMISES:** All rooms/areas of a portion of the ground floor, mezzanine, and lower level, as shown hatched on the floor plans annexed hereto as **Exhibit A** and incorporated by reference as if fully set forth in length, in the building known as and located at 220 Fifth Avenue, New York, New York 10001.

**LEASE:** dated December 19, 2014, by and between Landlord's predecessor-in-interest, Dino & Sons Realty Corp., as landlord, and Tenant, as tenant. Said Lease being modified by a First Lease Modification Agreement, dated June 30, 2017.

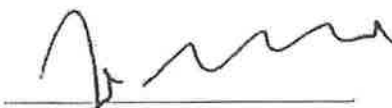
**DATE OF THIS NOTICE:** May 10, 2018.

**PLEASE TAKE NOTICE**, in accordance with Article 31 of the Lease, on May 9, 2018 and from your Security Deposit of \$100,000.00, the sum of \$65,000.00 from your Security Deposit was used, applied, and retained for outstanding rent and additional rent due, as set forth in the ledger annexed hereto as **Exhibit B** and incorporated by reference as if fully set forth in length, upon the grounds that you failed to comply with a certain Amended Notice of Intent, dated March 8, 2018, a copy of which together with proof of service thereof is annexed hereto as **Exhibit C** and incorporated herein with the same force and effect as if fully set forth at length. You are now required, **on or before May 20, 2018**, that being more than five (5) days after service of this Notice upon you, to pay to the Landlord the sum of \$65,000.00 representing the sum so used, applied, and retained, which shall be added to the Security Deposit so that the same shall be replenished to its former amount, and so that Landlord shall have the full Security Deposit on hand at all times during the Term pursuant to Article 31 of the Lease.

**PLEASE TAKE FURTHER NOTICE**, this Notice is served upon you pursuant to Sections 17, 27, and 31 of the Lease and other applicable provisions of law and/or statutes.


**PLEASE TAKE FURTHER NOTICE**, pursuant to Sections 19, 31, and 51(B) of the Lease, you are responsible for any and all legal expenses and attorneys' fees incurred by the Landlord.

**PLEASE TAKE FURTHER NOTICE**, that any response to this Notice must be sent and directed to the below-named attorneys for the Landlord.



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By: Joseph Goldsmith, Esq.  
217 Broadway, Suite 401  
New York, New York 10007  
Tel.: (212) 267-6364  
Email: jgoldsmith@kaulaw.com

**220 FIFTH REALTY LLC**  
[Landlord]



By: Matthew Lembo  
Title: Vice President and Authorized Signatory

*Exhibit "A"*

Execution

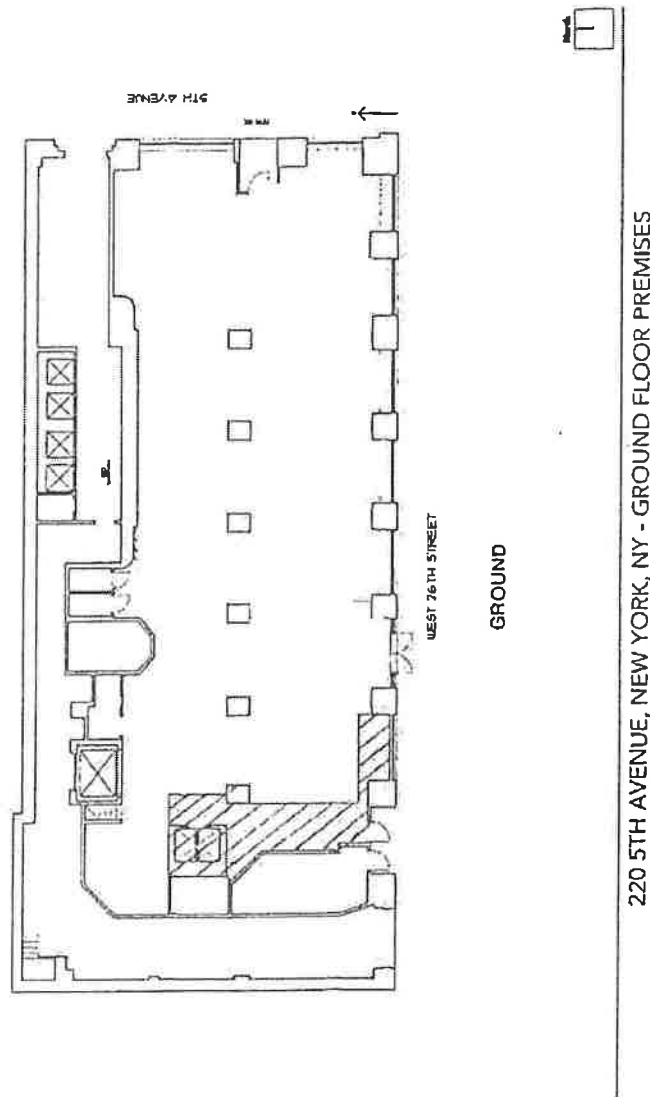
12/19/2014

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Exhibit "A"

The Demised Premises

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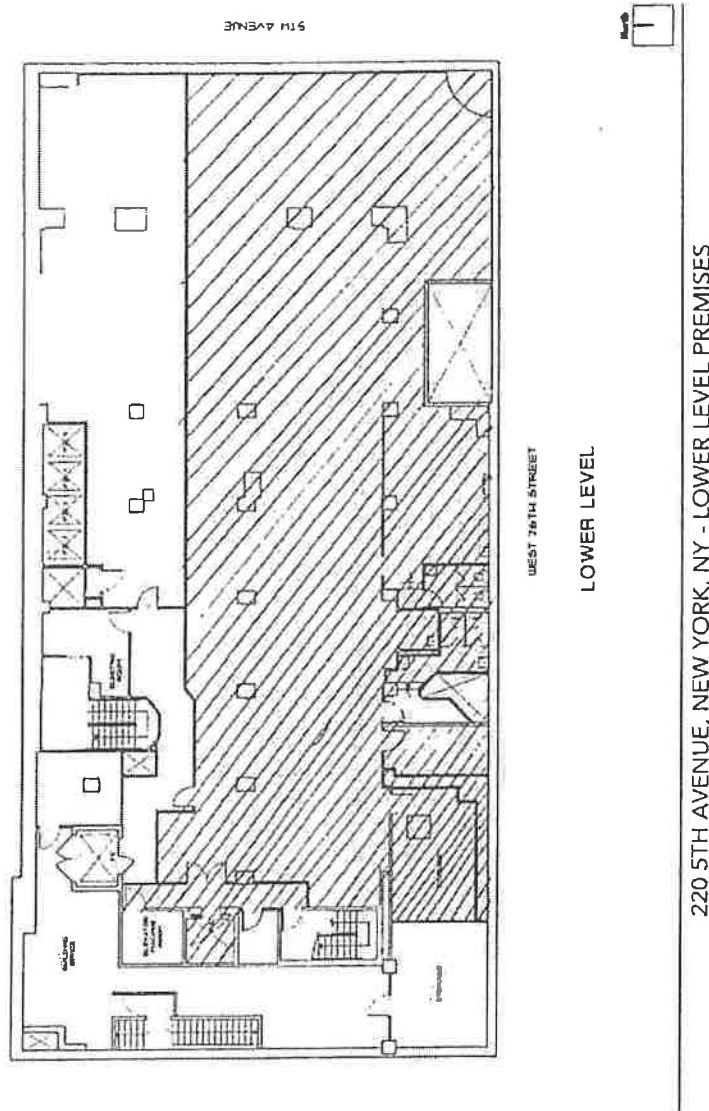




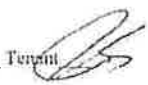
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12/19/2014

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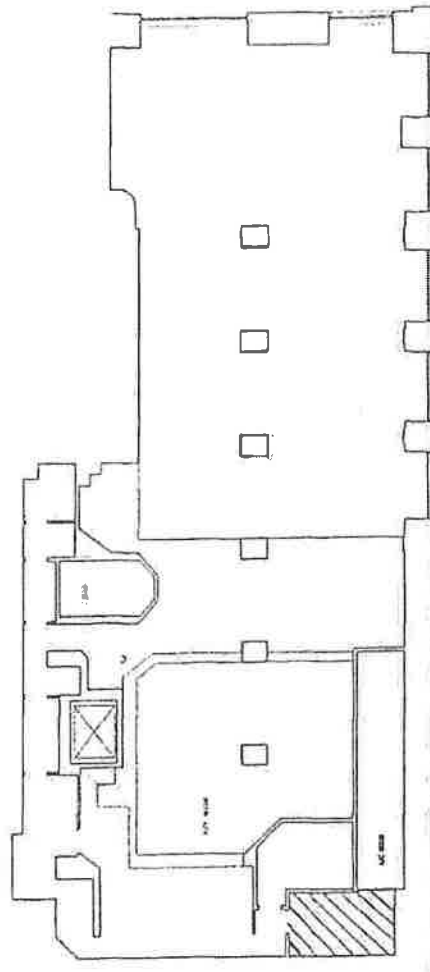
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Please Initial Here: Landlord \_\_\_\_\_ Tenant 

Execution

12/18/2014

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MEZZANINE

25

Please Initial Here: Landlord

Tenant

A handwritten signature in dark ink, appearing to be "GS", written over the "Tenant" line.

*Exhibit "B"*

Ledger

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# STELLAR MANAGEMENT

Date : 5/9/2018

## Lease Ledger

Code E0819146 Property 220Fifth Lease From 3/15/2016  
 Name Scorpion Club Ventures, LLC Unit 220-SUBC Lease To 10/31/2031

Date	Description	Unit	Charge	Payment	Balance	Chg/Rec
4/1/2017	Previous balance carried forward.	220-SUBC	18,319.96		18,319.96	31513435
4/1/2017	Previous balance carried forward:	220-SUBC	4,197.00		22,516.96	31513437
4/1/2017	Commercial Rent (04/2017)	220-SUBC	17,706.42		40,223.38	31513679
4/1/2017	Sprinkler Charge (04/2017)	220-SUBC	200.00		40,423.38	31513680
4/1/2017	:Posted by QuickTrans (secdep)	220-SUBC	100,000.00		140,423.38	31540924
4/1/2017	Chk# :QuickTrans :Posted by QuickTrans			100,000.00	40,423.38	6293195
5/1/2017	Electric Sub-meter 03/21/17-04/19/17	220-SUBC	227.46		40,650.84	31537972
5/1/2017	Commercial Rent (05/2017)	220-SUBC	17,706.42		58,357.26	31538331
5/1/2017	Sprinkler Charge (05/2017)	220-SUBC	200.00		58,557.26	31538332
6/1/2017	Commercial Rent (06/2017)	220-SUBC	17,706.42		76,263.68	31566235
6/1/2017	Sprinkler Charge (06/2017)	220-SUBC	200.00		76,463.68	31566236
6/1/2017	Electric Sub-meter 4/19/17-05/09/17	220-SUBC	155.03		76,618.71	31567055
7/1/2017	Electric Sub-meter 5/09/17-06/08/17	220-SUBC	244.12		76,862.83	31593009
7/1/2017	Commercial Rent (07/2017)	220-SUBC	17,706.42		94,569.25	31596470
7/1/2017	Commercial Sprinkler and Water (07/2017)	220-SUBC	200.00		94,769.25	31596471
7/25/2017	Chk# 1679718332 :CHECKscan Payment			19,537.70	75,231.55	6372035
8/1/2017	Real Estate Tax for the period 07/17-06/18	220-SUBC	9,227.33		84,458.88	31618030
8/1/2017	Electric sub-meter 06/08/17-07/10/17	220-SUBC	200.96		84,659.84	31624432
8/1/2017	Commercial Rent (08/2017)	220-SUBC	17,706.42		102,366.26	31624706
8/1/2017	Commercial Sprinkler and Water (08/2017)	220-SUBC	200.00		102,566.26	31624707
9/1/2017	Electric sub-meter 7/10/17-08/08/17	220-SUBC	180.25		102,746.51	31653614
9/1/2017	Commercial Rent (09/2017)	220-SUBC	17,706.42		120,452.93	31653585

Ledger

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9/1/2017	Commercial Sprinkler and Water (09/2017)	220-SUBC	200.00		120,652.93	31653886
10/1/2017	Electric sub-meter 08/08/17-09/07/17	220-SUBC	165.18		120,818.11	31679659
10/1/2017	Commercial Rent (10/2017)	220-SUBC	7,996.45		128,814.56	31679920
10/1/2017	Commercial Rent (10/2017)	220-SUBC	10,001.27		138,815.83	31679921
10/1/2017	Commercial Sprinkler and Water (10/2017)	220-SUBC	200.00		139,015.83	31679922
10/18/2017	Credit October 2017 Rent	220-SUBC	(86,460.91)		52,554.92	31708037
10/18/2017	October 2017 Debit Judgement.	220-SUBC	3,509.99		56,064.91	31708038
10/18/2017	Credit Sprinkler charge.	220-SUBC	(600.00)		55,464.91	31708039
11/1/2017	Electric sub-meter 09/07/17-10/06/17	220-SUBC	284.62		55,749.53	31707792
11/1/2017	Commercial Rent (11/2017)	220-SUBC	18,237.63		73,987.16	31709209
11/1/2017	Commercial Sprinkler and Water (11/2017)	220-SUBC	200.00		74,187.16	31709210
11/1/2017	Judgement Receivable (11/2017)	220-SUBC	3,505.99		77,693.15	31709211
11/2/2017	Chk# 001111 :CHECKscan Payment			22,035.18	55,657.97	6469931
11/15/2017	1 Replacement Meter	220-SUBC	2,142.86		57,800.83	31734510
11/28/2017	Chk# :ACHWEB Online Payment Reversed by ctrl#6510795			12,000.00	45,800.83	6488636
11/29/2017	Chk# :ACHWEB Online Payment Reversed by ctrl#6510793			9,890.00	35,910.83	6489474
11/29/2017	Chk# :ACHWEB Online Payment			9,890.00	26,020.83	6489476
12/1/2017	Electric sub-meter 10/12/17-11/09/17	220-SUBC	192.96		26,213.79	31737795
12/1/2017	Commercial Rent (12/2017)	220-SUBC	18,237.63		44,451.42	31738028
12/1/2017	Commercial Sprinkler and Water (12/2017)	220-SUBC	200.00		44,651.42	31738029
12/1/2017	Judgement Receivable (12/2017)	220-SUBC	3,505.99		48,157.41	31738030
12/1/2017	Late fees as of December 2017	220-SUBC	24,572.00		72,729.41	31759430
12/7/2017	Chk# :ACHWEB Online Payment			13,000.00	59,729.41	6504233
12/15/2017	Returned check charge	220-SUBC	25.00		59,754.41	31761541
12/15/2017	Chk# :ACHWEB NSF receipt Ctrl# 6489474			(9,890.00)	69,644.41	6510793
12/15/2017	Chk# :ACHWEB NSF receipt Ctrl# 6488636			(12,000.00)	81,644.41	6510795
12/20/2017	Chk# :ACHWEB Online Payment			22,036.00	59,608.41	6513384
12/29/2017	Chk# :ACHWEB Online Payment			24,047.10	35,561.31	6516252
12/31/2017	December 2017 Late fees.	220-SUBC	1,900.00		37,461.31	31764836
1/1/2018	Electric sub-meter 11/9/17-12/13/17	220-SUBC	298.69		37,760.00	31764387
1/1/2018	Commercial Rent (01/2018)	220-SUBC	18,237.63		55,997.63	31764880

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1/1/2018	Commercial Sprinkler and Water (01/2018)	220-SUBC	200.00		56,197.63	<u>31764885</u>
1/1/2018	Judgement Receivable (01/2018)	220-SUBC	3,505.99		59,703.62	<u>31764886</u>
1/29/2018	late fees	220-SUBC	1,892.00		61,595.62	<u>31794549</u>
2/1/2018	Electric sub-meter 12/13/18-1/12/18	220-SUBC	240.65		61,836.27	<u>31791326</u>
2/1/2018	Commercial Rent (02/2018)	220-SUBC	18,237.63		80,073.90	<u>31794675</u>
2/1/2018	Commercial Sprinkler and Water (02/2018)	220-SUBC	200.00		80,273.90	<u>31794676</u>
2/1/2018	Judgement Receivable (02/2018)	220-SUBC	3,505.99		83,779.89	<u>31794677</u>
2/27/2018	late fees	220-SUBC	1,390.00		85,169.89	<u>31822813</u>
2/27/2018	Charge for April 2017 monies owed with respect to the release of the lien on the building.	220-SUBC	1,800.00		86,969.89	<u>31822825</u>
2/27/2018	Reverse write off on 10/18/17,	220-SUBC	86,461.00		173,430.89	<u>31822826</u>
2/27/2018	Write-off the correct amount on 7/25/17,	220-SUBC	(76,538.00)		96,892.89	<u>31822827</u>
2/27/2018	8/1/17 Rent concession	220-SUBC	(17,706.00)		79,186.89	<u>31822828</u>
2/27/2018	Credit incorrect amount of late fee in 12/1/17,	220-SUBC	(24,572.00)		54,614.89	<u>31822829</u>
2/27/2018	Credit incorrect amount of late fee in 12/31/17,	220-SUBC	(1,900.00)		52,714.89	<u>31822830</u>
2/27/2018	Credit incorrect amount of late fee in 1/29/18,	220-SUBC	(1,832.00)		50,882.89	<u>31822831</u>
2/27/2018	Late fee as of 12/1/17	220-SUBC	13,231.00		64,113.89	<u>31822832</u>
2/27/2018	Late fee as of 12/31/17	220-SUBC	781.00		64,894.89	<u>31822833</u>
2/27/2018	Late fees as of 1/29/18	220-SUBC	685.00		65,579.89	<u>31822834</u>
2/27/2018	Reverse - Credit incorrect amount of late fee in 1/29/18.	220-SUBC	1,832.00		67,411.89	<u>31824032</u>
2/27/2018	Credit incorrect amount of late fee in 1/29/18.	220-SUBC	(1,892.00)		65,519.89	<u>31824033</u>
2/28/2018	9/1/17 Rent concession	220-SUBC	(17,706.00)		47,813.89	<u>31822907</u>
3/1/2018	Electric Sub-meter 1/12/18-2/13/18	220-SUBC	295.98		48,109.87	<u>31819677</u>
3/1/2018	Commercial Rent (03/2018)	220-SUBC	18,237.63		66,347.50	<u>31822886</u>
3/1/2018	Commercial Sprinkler and Water (03/2018)	220-SUBC	200.00		66,547.50	<u>31822887</u>
3/1/2018	Judgement Receivable (03/2018)	220-SUBC	3,505.99		70,053.49	<u>31822888</u>
3/20/2018	Electric Sub-meter 2/13/18-3/15/2018	220-SUBC	139.93		70,193.42	<u>31847922</u>
3/29/2018	late fees	220-SUBC	2,241.00		72,434.42	<u>31851231</u>
4/1/2018	Commercial Rent (04/2018)	220-SUBC	18,237.63		90,672.05	<u>31851282</u>

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4/1/2018	Commercial Sprinkler and Water (04/2018)	220-SUBC	200.00		90,872.05	<u>31851288</u>
4/1/2018	Judgement Receivable (04/2018)	220-SUBC	3,505.99		94,378.04	<u>31851289</u>
4/25/2018	Electric Sub Meter 3/15/2018-4/13/2018	220-SUBC	67.09		94,445.13	<u>31879060</u>
4/27/2018	Late fees.	220-SUBC	3,013.00		97,458.13	<u>31879372</u>
5/1/2018	Commercial Rent (05/2018)	220-SUBC	18,237.63		115,695.76	<u>31898407</u>
5/1/2018	Commercial Sprinkler and Water (05/2018)	220-SUBC	200.00		115,895.76	<u>31898408</u>
5/1/2018	Judgement Receivable (05/2018)	220-SUBC	3,505.99		119,401.75	<u>31898409</u>
5/9/2018	Security Deposit Drawdown	220-SUBC	(65,000.00)		54,401.75	<u>31901424</u>

*Exhibit "C"*



**AMENDED NOTICE OF INTENT**

**TO:** Scorpion Fitness Inc. and Scorpion Club Ventures, LLC ("Tenant").

**PREMISES:** All rooms/areas of a portion of the ground floor, mezzanine, and lower level, as shown hatched on the floor plans annexed hereto as Exhibit 1 and incorporated by reference as if fully set forth in length, in the building known as and located at 220 Fifth Avenue, New York, New York 10001.

**LEASE:** dated December 19, 2014, by and between Landlord's predecessor-in-interest, Dino & Sons Realty Corp., as landlord, and Tenant, as tenant. Said Lease being modified by a First Lease Modification Agreement, dated June 30, 2017.


**DATE OF THIS NOTICE:** March 8, 2018

**PLEASE TAKE NOTICE**, you are justly indebted to the Landlord of the Premises in the total sum of \$70,053.00, as set forth in the ledger annexed hereto as Exhibit 2 and incorporated by reference as if fully set forth in length, which sum you are required to pay on or before March 19, 2018, that being at least five (5) days after the date of service of this Notice upon you. That, in accordance with Sections 17 and 31 of the referenced Lease, if you fail to pay the aforementioned rental arrears on or before March 19, 2018, the Landlord shall be entitled to: (i) apply and retain the whole or part of the Security Deposit to the extent required for the payment of the aforementioned rental arrears; and (ii) you shall be required to deposit with Landlord the amount so applied or retained so that Landlord shall have the full Security Deposit on hand at all times during the Term pursuant to Section 31 of the referenced Lease.


**PLEASE TAKE FURTHER NOTICE**, this Notice is served upon you pursuant to Sections 17, 27, and 31 of the Lease and other applicable provisions of law and/or statutes.

**PLEASE TAKE FURTHER NOTICE**, pursuant to Sections 19, 31, and 51(B) of the Lease, you are responsible for any and all legal expenses and attorneys' fees incurred by the Landlord.

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Attorneys for Landlord  
By: Joseph Goldsmith, Esq.  
217 Broadway, Suite 401  
New York, New York 10007  
Tel.: (212) 267-6364  
Email: jgoldsmith@kaulaw.com

220 FIFTH REALTY LLC  
(Landlord)

  
By: Matthew Lembo  
Title: Vice President and Authorized  
Signatory

*Exhibit "1"*

Execution

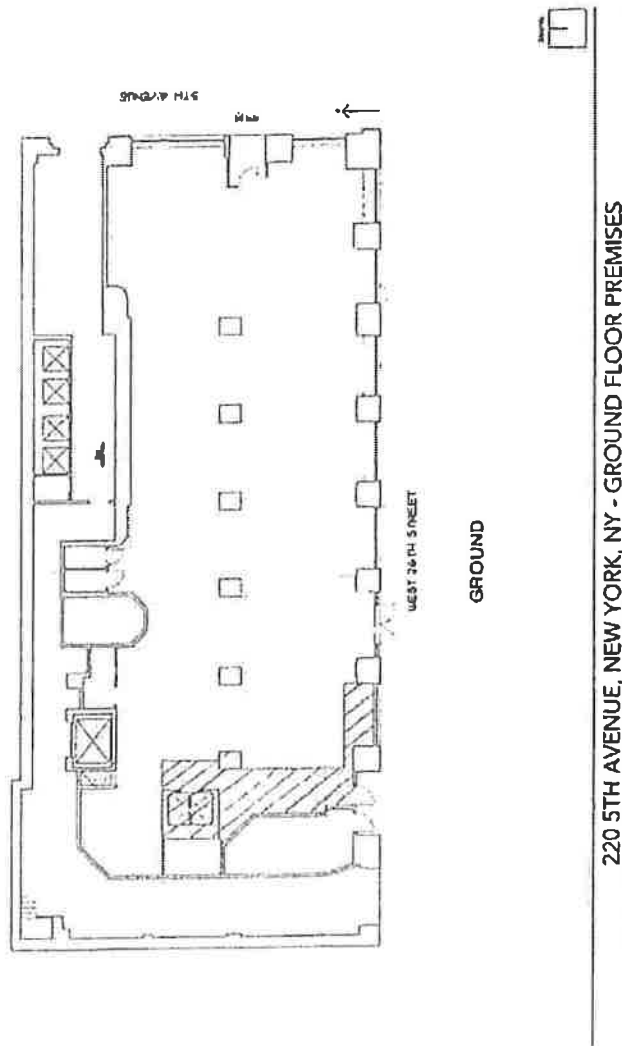
12/16/2014

Page 31 of 47

Exhibit "A"

The Demised Premises

Not to scale; all dimensions approximate; subject to actual conditions.



23

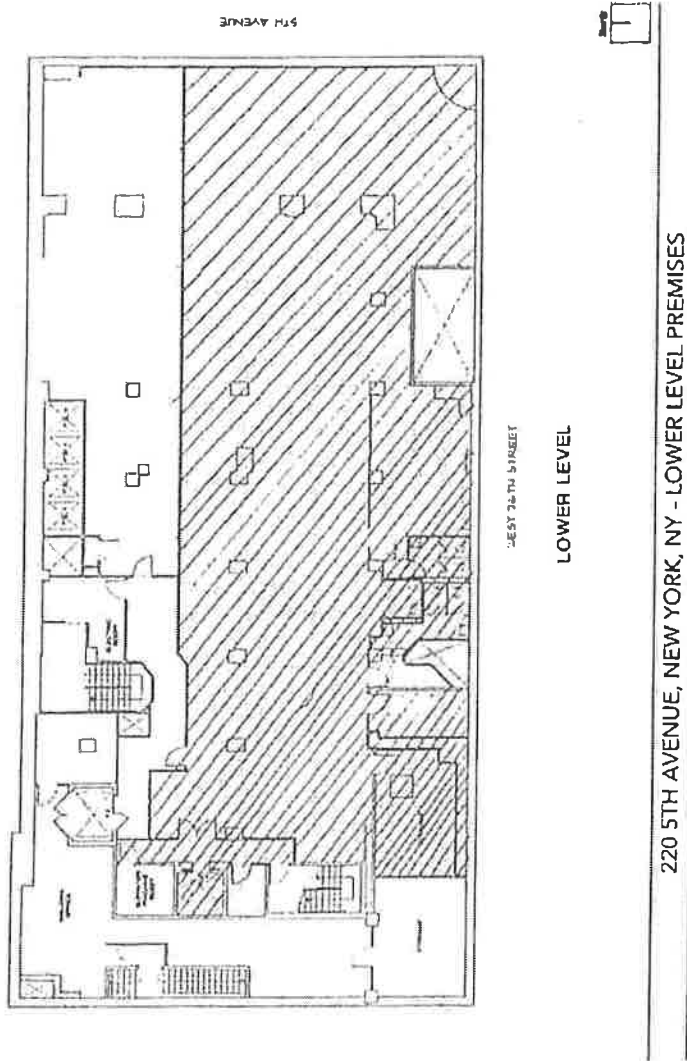
Please Initial Here: Landlord

Tenn

Execution

12/19/2014

Page 32 of 47



24

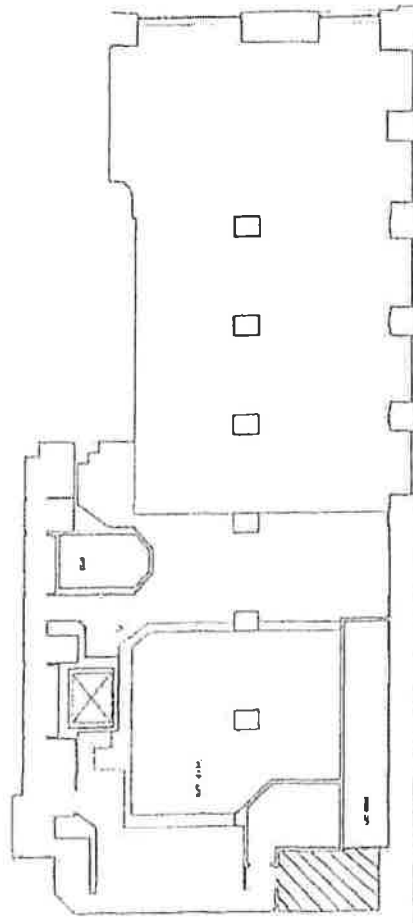
Please Initial Here: Landlord

Tenant

Execution

12/19/2014

Page 33 of 47



MEZZANINE

25

Please Initial Here: Landlord \_\_\_\_\_ Tenant 

*Exhibit "2"*

220 5th Avenue  
Scorpion Club Ventures, LLC Ledger

Last Updated: 03/07/18  
CONFIDENTIAL: FOR STELLAR MANAGEMENT INTERNAL USE ONLY

Summary Ledger	
Charge Type	Total Charges
Base Rent	\$142,834
Reimbursements	0.227
Submetering Charges	2,400
Other Charges	109,966
Late Fees	16,067
Total Charges	\$261,493
Less: Payments	(\$210,545)
Not Due	\$70,948

220 5th Avenue  
 Scorpion Club Ventures, LLC Ledger

Last Updated: 03/07/18

CONFIDENTIAL: FOR STELLAR MANAGEMENT INTERNAL USE ONLY

Detailed Ledger					
Date	Description	Charge Type	Charges / Payments		
			Charge	Payment	Balance
04/01/2017	Previous balance carried forward	Base Rent	\$16,320		\$16,320
04/01/2017	Previous balance carried forward	Other Charges	4,197		22,517
04/01/2017	Commercial Rent (04/2017)	Base Rent	17,706		40,223
04/01/2017	Sprinkler Charge (04/2017)	Other Charges	200		40,423
04/01/2017	Posted by QuickTrans (satchep)	Other Charges	100,000		140,423
04/01/2017	CHS - QuickTrans Posted by QuickTrans	Payment		100,000	40,423
05/01/2017	Electric Sub-meter 05/01/17-04/01/17	Submetering Charges	227		40,650
05/01/2017	Commercial Rent (05/2017)	Base Rent	17,706		58,357
05/01/2017	Sprinkler Charge (05/2017)	Other Charges	200		58,557
06/01/2017	Commercial Rent (06/2017)	Base Rent	17,706		76,264
06/01/2017	Sprinkler Charge (06/2017)	Other Charges	200		76,464
06/01/2017	Electric Sub-meter 01/01/17-05/01/17	Submetering Charges	155		76,619
07/01/2017	Electric Sub-meter 06/01/17-06/01/17	Submetering Charges	244		76,863
07/01/2017	Commercial Rent (07/2017)	Base Rent	17,706		94,569
07/01/2017	Commercial Sprinkler and Water (07/2017)	Other Charges	200		94,769
07/25/2017	CHS 1679718322 - CHECK cash Payment	Payment		19,528	75,242
08/01/2017	Rent Estate Tax for the period 07/17-08/01/17	Residuals/fees	8,222		84,464
08/01/2017	Electric sub-meter 06/01/17-07/01/17	Submetering Charges	201		84,665
08/01/2017	Commercial Rent (08/2017)	Base Rent	17,706		102,371
08/01/2017	Commercial Sprinkler and Water (08/2017)	Other Charges	200		102,571
09/01/2017	Electric sub-meter 7/1/017-08/01/17	Submetering Charges	180		102,751
09/01/2017	Commercial Rent (09/2017)	Base Rent	17,706		120,457
09/01/2017	Commercial Sprinkler and Water (09/2017)	Other Charges	200		120,657
10/01/2017	Electric sub-meter 08/01/17-09/01/17	Submetering Charges	163		120,820
10/01/2017	Commercial Rent (10/2017)	Base Rent	7,800		128,620
10/01/2017	Commercial Rent (10/2017)	Base Rent	10,001		138,621
10/01/2017	Commercial Sprinkler and Water (10/2017)	Other Charges	200		139,021
10/18/2017	Grent October 2017 Rent	Base Rent	(86,461)		52,560
10/18/2017	October 2017 Debt Judgement	Base Rent	3,510		56,070
10/18/2017	Grent Sprinkler charge	Other Charges	(600)		55,470
11/01/2017	Electric sub-meter 09/01/17-10/01/17	Submetering Charges	285		55,755
11/01/2017	Commercial Rent (11/2017)	Base Rent	18,230		73,985
11/01/2017	Commercial Sprinkler and Water (11/2017)	Other Charges	260		74,245
11/01/2017	Judgement Receivable (11/2017)	Base Rent	3,506		77,751
11/02/2017	CHS 161111 - CHECK cash Payment	Payment		22,035	55,716
11/15/2017	1 Replacement Meter	Other Charges	2,143		57,859
11/28/2017	CHS - ACIWEB Online Payment Reversed by CHS 6510705	Payment		12,000	45,859
11/29/2017	CHS - ACIWEB Online Payment Reversed by CHS 6516783	Payment		9,850	36,009
11/29/2017	CHS - ACIWEB Online Payment	Payment		3,890	39,899
12/01/2017	Electric sub-meter 10/01/17-11/01/17	Submetering Charges	193		39,992
12/01/2017	Commercial Rent (12/2017)	Base Rent	18,230		58,222
12/01/2017	Commercial Sprinkler and Water (12/2017)	Other Charges	260		60,822
12/01/2017	Judgement Receivable (12/2017)	Base Rent	3,506		64,328
12/01/2017	Late fees as of December 2017	Late Fees	24,572		88,900
12/07/2017	CHS - ACIWEB Online Payment	Payment		13,000	75,900
12/15/2017	Returned check charge	Other Charges	75		75,975
12/15/2017	CHS - ACIWEB NSF receipt CHS 6409474	Payment		(2,850)	73,125
12/15/2017	CHS - ACIWEB NSF receipt CHS 6406036	Payment		(12,000)	61,125
12/20/2017	CHS - ACIWEB Online Payment	Payment		22,000	83,125
12/29/2017	CHS - ACIWEB Online Payment	Payment		24,047	107,172
12/31/2017	December 2017 Late fees	Late Fees	1,000		108,172
01/01/2018	Electric sub-meter 11/01/17-12/01/17	Submetering Charges	260		110,772
01/01/2018	Commercial Rent (01/2018)	Base Rent	18,230		129,002
01/01/2018	Commercial Sprinkler and Water (01/2018)	Other Charges	250		129,252
01/01/2018	Judgement Receivable (01/2018)	Base Rent	3,668		132,920
01/29/2018	Late fees	Late Fees	1,872		134,792
02/01/2018	Electric sub-meter 12/01/17-01/01/18	Submetering Charges	244		135,036
02/01/2018	Commercial Rent (02/2018)	Base Rent	18,230		153,266
02/01/2018	Commercial Sprinkler and Water (02/2018)	Other Charges	200		153,466
02/01/2018	Judgement Receivable (02/2018)	Base Rent	3,488		156,954
02/02/2018	Late fees	Late Fees	1,350		158,304
02/27/2018	Change in April 2017 invoice with respect to the release of lien on the building	Other Charges	1,000		159,304
02/27/2018	Reverse write off on 12/1/017	Base Rent	(6,401)		152,903
02/27/2018	Write off the credit amount on 7/25/17	Base Rent	(76,518)		76,385
02/27/2018	8/1/17 Rent concession	Base Rent	(11,703)		64,682
02/27/2018	Credit incorrect amount of late fee in 12/1/17	Late Fees	(24,572)		40,110
02/27/2018	Credit incorrect amount of late fee in 12/31/17	Late Fees	(1,872)		38,238
02/27/2018	Credit incorrect amount of late fee in 12/29/17	Late Fees	(1,872)		36,366
02/27/2018	Late fee as of 12/1/17	Late Fees	13,231		49,597
02/27/2018	Late fee as of 12/31/17	Late Fees	740		50,337
02/27/2018	Late fee as of 12/29/17	Late Fees	603		50,940
02/27/2018	01/17 Rent concession	Base Rent	(11,703)		39,237
03/01/2018	Electric sub-meter 02/01/18-03/01/18	Submetering Charges	254		40,491
03/01/2018	Commercial Rent (03/2018)	Base Rent	18,230		58,721
03/01/2018	Commercial Sprinkler and Water (03/2018)	Other Charges	200		60,721
03/01/2018	Judgement Receivable (03/2018)	Base Rent	3,506		64,227
Total			\$280,680	\$210,546	\$70,053



AFFIDAVIT OF SERVICE

STATE OF NEW YORK     }  
                                      } s.s.  
COUNTY OF NEW YORK }

I, Tara George being duly sworn, deposes and says:

I am not a party to this action, am over 18 years of age and reside in the Queens, New York.

On March 8, 2018, I served the within **AMENDED NOTICE OF INTENT** upon:

Scorpion Fitness, Inc.  
220 Fifth Avenue,  
New York, New York 10001

Scorpion Fitness, Inc.  
88 Lexington Ave., Ste. 9D  
New York, New York 10016

Scorpion Club Ventures LLC  
220 Fifth Avenue,  
New York, New York 10001

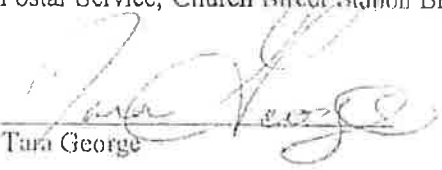
Scorpion Club Ventures LLC  
88 Lexington Ave., Ste. 9D  
New York, New York 10016

Scorpion Fitness, Inc.  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016

Massimo F. D'Angelo  
ADAM LEITMAN BAILEY, P.C.  
One Battery Park Plaza, Eighteenth Floor  
New York, New York 10004

Scorpion Club Ventures LLC  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016

by mailing the same first class with certificates of mailing in sealed envelopes, with postage prepaid thereon, in a post-office or official depository of the U.S. Postal Service within the State of New York, addressed to the addressees as indicated above and by overnight mail service (with Express Mail codes EF139728781US, EF139728778US, EF139728764US, EF139728821US, EF139728818US, EF139728804US, EF139728795US) by placing the same in a postpaid, properly addressed and sealed envelopes and delivering said envelopes to a postal employee at a United States Post Office in the Borough of Manhattan, City and State of New York for processing under the exclusive care and custody of the United States Postal Service, Church Street Station Branch, within the City, County and State of New York.

  
Tara George

Sworn to before me this  
9<sup>th</sup> day of March, 2018

  
Notary Public

JOSEPH J. MARRAS, Notary Public  
Notary Public, State of New York  
No. 004076600  
Qualified in New York City  
Commission Expires April 16, 2020

**UNITED STATES POSTAL SERVICE** Certificate of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS for mailing. This form may be used for domestic and international mail.

To pay postage, attach this form to the mail.

**\$1.40 0**  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

**CHURCH STREET STATION**  
NEW YORK, NY 10007  
2018

**Kossoff, PLLC**  
217 Broadway - Suite 401  
New York, NY 10007

To: **Scorpion Fitness, Inc.**  
**88 Lexington Ave., Ste. 9D**  
**New York, New York 10016**

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES POSTAL SERVICE** Certificate of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS for mailing. This form may be used for domestic and international mail.

To pay postage, attach this form to the mail.

**\$1.40 0**  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

**CHURCH STREET STATION**  
NEW YORK, NY 10007  
2018

**Kossoff, PLLC**  
217 Broadway - Suite 401  
New York, NY 10007

To: **Scorpion Club Ventures LLC**  
**325 Fifth Avenue, Ste. 412**  
**New York, New York 10016**

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES POSTAL SERVICE** Certificate of Mailing

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US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

**CHURCH STREET STATION**  
NEW YORK, NY 10007  
2018

**Kossoff, PLLC**  
217 Broadway - Suite 401  
New York, NY 10007

To: **Scorpion Club Ventures LLC**  
**88 Lexington Ave., Ste. 9D**  
**New York, New York 10016**

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES POSTAL SERVICE** Certificate of Mailing

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**\$1.40 0**  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

**CHURCH STREET STATION**  
NEW YORK, NY 10007  
2018

**Kossoff, PLLC**  
217 Broadway - Suite 401  
New York, NY 10007

To: **Scorpion Club Ventures LLC**  
**325 Fifth Avenue**  
**New York, New York 10016**

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES**  
**POSTAL SERVICE**  
Certificate of Mailing  
The Certificate of Mailing provides evidence that mail has been presented to USPS for mailing. This form may be used for domestic and international mail.  
From: Kossoff, PLLC  
217 Broadway - Suite 401  
New York, NY 10007  
To: Scorpion Fitness, Inc.  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016  
\$1.40 0  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007  
CHURCH STREET STATION  
MAR 19 2018  
NEW YORK, NY 10007  
PS Form 3817, April 2007 PSN 7530-02-000-9055

**UNITED STATES**  
**POSTAL SERVICE**  
Certificate of Mailing  
The Certificate of Mailing provides evidence that mail has been presented to USPS for mailing. This form may be used for domestic and international mail.  
From: Kossoff, PLLC  
217 Broadway - Suite 401  
New York, NY 10007  
To: Massimo F. D'Angelo  
Adam Lettman Baillet, P.C.  
One Battery Park Plaza, 15th Floor  
New York, New York 10004  
\$1.40 0  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007  
CHURCH STREET STATION  
MAR 19 2018  
NEW YORK, NY 10007  
PS Form 3817, April 2007 PSN 7530-02-000-9055

**UNITED STATES**  
**POSTAL SERVICE**  
Certificate of Mailing  
The Certificate of Mailing provides evidence that mail has been presented to USPS for mailing. This form may be used for domestic and international mail.  
From: Kossoff, PLLC  
217 Broadway - Suite 401  
New York, NY 10007  
To: Scorpion Fitness, Inc.  
325 Fifth Avenue  
New York, New York 10016  
\$1.40 0  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007  
CHURCH STREET STATION  
MAR 19 2018  
NEW YORK, NY 10007  
PS Form 3817, April 2007 PSN 7530-02-000-9055

**UNITED STATES**  
**POSTAL SERVICE**  
Certificate of Mailing  
The Certificate of Mailing provides evidence that mail has been presented to USPS for mailing. This form may be used for domestic and international mail.  
From: Kossoff, PLLC  
217 Broadway - Suite 401  
New York, NY 10007  
To: Scorpion Fitness, Inc.  
325 Fifth Avenue  
New York, New York 10016  
\$1.40 0  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007  
CHURCH STREET STATION  
MAR 19 2018  
NEW YORK, NY 10007  
PS Form 3817, April 2007 PSN 7530-02-000-9055

**CUSTOMER USE ONLY**

FROM: **K088OFF, PLLC**  
217 BROADWAY, SUITE H 401  
NEW YORK, NY 10007-2944

220 Fifth Avenue (ASN)

**PAYMENT BY ACCOUNT (if applicable)**  
USPS® Corporate Acct. No. 092004 Federal Agency Acct. No. or Postal Service® Acct. No.

**DELIVERY OPTIONS (Customer Use Only)**

☐ **SIGNATURE REQUIRED** Note: The addressee must check the "Signature Required" box if the addressee is not the addressee's signature. On 2) Purchases additional insurance, On 3) Purchases COD (Cash on Delivery) On 4) Purchases Return Receipt (Form 3800) If the box is not checked, the Postal Service will not be responsible for the return of the item. The addressee must retain the receipt for the item without attempting to return the item to the addressee's signature and return.

**Delivery Options**

☐ No Saturday Delivery (delivered next business day)  
☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
\*Refer to USPS.com or local Post Office for availability.

**TO: (PLEASE PRINT)**  
Scorpion Fitness, Inc.  
220 Fifth Avenue  
New York, New York 10001

**ZIP+4 (US ADDRESS ONLY)**  
10001

For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
\$100.00 Insurance Included.  
*Amended notice of intent*



**UNITED STATES POSTAL SERVICE**

**PRIORITY MAIL EXPRESS™**

**ORIGIN (POSTAL SERVICE USE ONLY)**

**TO ZIP Code** 10001 **City/State** NEW YORK, NY **Country** USA

**Date Accepted** 7/4/15 **Scheduled Delivery Time** 10:30 AM - 12:00 PM

**Time Accepted** 16:00 **10:30 AM Delivery Fee** \$2.00 **Return Receipt Fee** \$2.00 **Use Actual Transportation Fee** \$

**Weight** 16.00 **Customer Return Premium Fee** \$0.00 **Total Postage & Fees** \$27.00

**DELIVERY (POSTAL SERVICE USE ONLY)**

**Delivery Address (MAILING)** **Time** **Employee Signature**

**Delivery Address (MAILING)** **Time** **Employee Signature**

2-CUSTOMER COPY

**CUSTOMER USE ONLY**

FROM: **K088OFF, PLLC**  
217 BROADWAY, SUITE H 401  
NEW YORK, NY 10007-2944

220 Fifth Avenue (ASN)

**PAYMENT BY ACCOUNT (if applicable)**  
USPS® Corporate Acct. No. 092004 Federal Agency Acct. No. or Postal Service® Acct. No.

**DELIVERY OPTIONS (Customer Use Only)**

☐ **SIGNATURE REQUIRED** Note: The addressee must check the "Signature Required" box if the addressee is not the addressee's signature. On 2) Purchases additional insurance, On 3) Purchases COD (Cash on Delivery) On 4) Purchases Return Receipt (Form 3800) If the box is not checked, the Postal Service will not be responsible for the return of the item. The addressee must retain the receipt for the item without attempting to return the item to the addressee's signature and return.

**Delivery Options**

☐ No Saturday Delivery (delivered next business day)  
☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
\*Refer to USPS.com or local Post Office for availability.

**TO: (PLEASE PRINT)**  
Scorpion Fitness, Inc.  
88 Lexington Ave., Ste. 90  
New York, New York 10016

**ZIP+4 (US ADDRESS ONLY)**  
10016

For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
\$100.00 Insurance Included.  
*Amended notice of intent*

**UNITED STATES POSTAL SERVICE**

**PRIORITY MAIL EXPRESS™**

**ORIGIN (POSTAL SERVICE USE ONLY)**

**TO ZIP Code** 10016 **City/State** NEW YORK, NY **Country** USA

**Date Accepted** 7/5/15 **Scheduled Delivery Time** 10:30 AM - 12:00 PM

**Time Accepted** 16:00 **10:30 AM Delivery Fee** \$2.00 **Return Receipt Fee** \$2.00 **Use Actual Transportation Fee** \$

**Weight** 16.00 **Customer Return Premium Fee** \$0.00 **Total Postage & Fees** \$27.00

**DELIVERY (POSTAL SERVICE USE ONLY)**

**Delivery Address (MAILING)** **Time** **Employee Signature**

**Delivery Address (MAILING)** **Time** **Employee Signature**

2-CUSTOMER COPY

REF: 139728804 US

UNITED STATES  
POSTAL SERVICE

PRIORITY  
\* MAIL \*  
EXPRESS<sup>100</sup>

<b>CUSTOMER POSTAL SERVICE ONLY</b>					
	<input checked="" type="checkbox"/> Priority Priority Mail® <b>3/19</b>	<input type="checkbox"/> Military Mailings	<input type="checkbox"/> PPO		
Date Recd.	Scheduled Delivery Date® (MM/DD/YYYY)	\$	<b>27.40</b>		
Time Accepted (MM/DD/YY) <b>3/19/87</b>	Scheduled Delivery Time <input type="checkbox"/> 10:05 AM <input type="checkbox"/> 3:00 PM <input type="checkbox"/> 12 NOON	Insurance Fee \$	CCF Fee \$		
Date Registered <b>16/4</b>	10:00 AM Delivery Fee \$	Return Receipt Fee \$	Letter Applied Insurance Fee \$		
Weight <b>5.0 LB</b>	Surcharge/Hazardous Material Fee \$	Total Postage & Fees \$	<b>27.40</b>		
Addressed Enclosures Allowed					
<b>DELIVERY (POSTAL SERVICE USE ONLY)</b>					
Delivery Attempt (MM/DD/YY)	Time	Employee Signature			
	<input type="checkbox"/> AM <input type="checkbox"/> PM				
Delivery Attempt (MM/DD/YY)	Time	Employee Signature			
	<input type="checkbox"/> AM <input type="checkbox"/> PM				
CAGE CODE, SEPTEMBER 1985 PSN 7500-01-000-0000		2-CUSTOMER COPY			

**CUSTOMER USE ONLY**  
 FROM: (return to) **U** **PHOTO**  
**K0980FF, PLLC**  
**217 BROADWAY, SUITE H 401**  
**NEW YORK, NY 10007-2944**  
**220 Fi-Fin, Scorpion** **(fkm)**  
**PAYMENT BY ACCOUNT (if applicable)**  
 USPS® Certificate A/c: **112** Federal Agency And / or POUSI Service: **112**  
**092004**  
**DELIVERY OPTIONS (Customer Use Only)**  
☐ **SIGNATURE REQUIRED** (See the inside most under the Signature Required box for the rules.)  
 (Requires the addressee sign the USPS® Tracking® and insurance. USPS® Purchases COO service. COI is  
 provided for the first service. It is not to be returned. The Postal Service will not be liable for the addressee's  
 mail receipt or return unless the addressee is attempting to obtain the addressee's signature on delivery.  
**Delivery Options**  
☐ **1st Class Delivery** (Delivery next business day)  
☐ **Quick Day Delivery** (Delivery the next business day, before 10:00 AM)  
☐ **10:30 AM Delivery** (Required additional fee, where available)  
 \*Order by 12:00 PM for local Post Office; not available  
**TO: (PLEASE PRINT)** **PHOTO**  
**Scorpion Club Ventures LLC**  
**325 Fi-Fin Avenue, Ste. 41E**  
**New York, New York 10016**  
**ZIP + 4** **04 0908050200**  
**1 0 0 1 6**  
 ■ **For pickup or USPS Tracking™, visit USPS.com or call 800-222-1011.**  
 ■ **\$100.00 Insurance included.**  
**Amended notice of intent**



EF 139728818 US



UNITED STATES  
POSTAL SERVICE

PRIORITY  
★ MAIL ★  
EXPRESS<sup>TM</sup>

AIR MAIL (POSTAL SERVICE USE ONLY)			
<input type="checkbox"/> Day	<input type="checkbox"/> 2-Day	<input type="checkbox"/> Priority	<input type="checkbox"/> Registered Mail
Postage Code (PSN)	Scheduled Delivery Date (MM/DD/YYYY)	Address	
1-2-3-4-5-6-7-8-9-0	3/18/88	2700	
Postage (PSN)	Scheduled Delivery Time	Insurance Fee	COO Fee
3/8/18	<input type="checkbox"/> 10:00 AM - <input type="checkbox"/> 3:00 PM <input type="checkbox"/> 12:00 PM	\$	\$
Third Party Fee	10:30 AM Delivery Fee	Return Receipt Fee	The Actual Postage Fee
16	\$	\$ 2.15	\$
Weight <input type="checkbox"/> Pounds <input type="checkbox"/> Kilograms	Sunday, Holiday, or Post Office Closed	Total Postage & Fees	
1	Accepted by Employee or Agent	\$ 2.15	
DELIVERY (POSTAL SERVICE USE ONLY)			
Delivery Method (PSN)	Signature Required	Signature	
<input type="checkbox"/> AM <input type="checkbox"/> PM			
Delivery Method (PSN)	Signature Required	Signature	
<input type="checkbox"/> AM <input type="checkbox"/> PM			
MAILING INSTRUCTIONS		2-CUSTOMER COPY	

**CUSTOMER USE ONLY**  
 FROM: (PLEASE PRINT) PHONE: ( )  
 K088OFF, PLLC  
 217 BROADWAY, SUITE H 401  
 NEW YORK, NY 10007-2944  
 220 Fifth Avenue (ASH)  
 PAYMENT BY ACCOUNT (if applicable)  
 USPS® Corporate Acct. No. 092004 Federal Agency Acct. No. or Postal Service® Acct. No.  
**DELIVERY OPTIONS (Customer Use Only)**  
☐ SIGNATURE REQUIRED (R) The meter must check for "Signature Required" box. If not checked, requires the addressee's signature. (R) Purchases additional insurance. (R) Purchases COD (Cash on Delivery) service. If the box is not checked, the Postal Service will leave the mail in the mailbox and attempt to deliver it again the next business day.  
☐ No Saturday Delivery (delivered next business day)  
☐ Sunday Holiday Delivery (delivered additional fee, where available)  
☐ 10:30 AM Delivery (delivered additional fee, where available)  
 Refer to USPS.com or local Post Office for availability.  
 TO: (PLEASE PRINT) PHONE: ( )  
 Massimo F. D'Angelo  
 Adam Leitman Bailey, P.C.  
 One Battery Park Plaza, Eighteenth Floor  
 New York, New York 10004  
 ZIP+4®: 10004-0004  
 1 0 0 0 4



EF 139728795 US

**UNITED STATES POSTAL SERVICE**  
**PRIORITY MAIL EXPRESS™**  
**ORIGIN (POSTAL SERVICE USE ONLY)**  
☐ Day ☐ Night ☐ Military ☐ DPO  
 Scheduled Delivery Date (MM/DD/YYYY) 3/9  
 Date Accepted (MM/DD/YYYY) 3/8/18  
 Time Accepted 16:46  
 Delivery Time 10:30 AM - 2:00 PM  
 Insurance Fee \$ 27.46  
 COD Fee \$  
 Return Receipt Fee \$ 2.00  
 Late Arrival Transportation Fee \$  
 Total Postage & Fees \$ 29.46  
**DELIVERY (POSTAL SERVICE USE ONLY)**  
 Delivery Address (MM/DD/YYYY) Time 4 AM  
 Employee Signature  
 Delivery Address (MM/DD/YYYY) Time 6 PM  
 Employee Signature  
 LABEL IT: SEPTEMBER 2018 POST 7550 00000000 2-CUSTOMER COPY

**CUSTOMER USE ONLY**  
 FROM: (PLEASE PRINT) PHONE: ( )  
 K088OFF, PLLC  
 217 BROADWAY, SUITE H 401  
 NEW YORK, NY 10007-2944  
 220 Fifth Avenue (ASH)  
 PAYMENT BY ACCOUNT (if applicable)  
 USPS® Corporate Acct. No. 092004 Federal Agency Acct. No. or Postal Service® Acct. No.  
**DELIVERY OPTIONS (Customer Use Only)**  
☐ SIGNATURE REQUIRED (R) The meter must check for "Signature Required" box. If not checked, requires the addressee's signature. (R) Purchases additional insurance. (R) Purchases COD (Cash on Delivery) service. If the box is not checked, the Postal Service will leave the mail in the mailbox and attempt to deliver it again the next business day.  
☐ No Saturday Delivery (delivered next business day)  
☐ Sunday Holiday Delivery (delivered additional fee, where available)  
☐ 10:30 AM Delivery (delivered additional fee, where available)  
 Refer to USPS.com or local Post Office for availability.  
 TO: (PLEASE PRINT) PHONE: ( )  
 Scorpion Club Ventures LLC  
 220 Fifth Avenue  
 New York, New York 10001  
 ZIP+4®: 10001-0001  
 1 0 0 0 1



EF 139728778 US

**UNITED STATES POSTAL SERVICE**  
**PRIORITY MAIL EXPRESS™**  
**ORIGIN (POSTAL SERVICE USE ONLY)**  
☐ Day ☐ Night ☐ Military ☐ DPO  
 Scheduled Delivery Date (MM/DD/YYYY) 3/9  
 Date Accepted (MM/DD/YYYY) 3/8/18  
 Time Accepted 16:46  
 Delivery Time 10:30 AM - 2:00 PM  
 Insurance Fee \$ 27.46  
 COD Fee \$  
 Return Receipt Fee \$ 2.00  
 Late Arrival Transportation Fee \$  
 Total Postage & Fees \$ 29.46  
**DELIVERY (POSTAL SERVICE USE ONLY)**  
 Delivery Address (MM/DD/YYYY) Time 4 AM  
 Employee Signature  
 Delivery Address (MM/DD/YYYY) Time 6 PM  
 Employee Signature  
 LABEL IT: SEPTEMBER 2018 POST 7550 00000000 2-CUSTOMER COPY

For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
 \$100.00 Insurance included.  
 amended notice of intent



**CUSTOMER USE ONLY**

FROM: (Print or type) (Firm, company, or individual)  
 K088OFF, PLLC  
 217 BROADWAY, SUITE H 401  
 NEW YORK, NY 10007-2944

220 Fifth Scorpion (1/5m)

**PAYMENT BY ACCOUNT (if applicable)**  
 USPS® Corporate Acct. No. 092004

**DELIVERY OPTIONS (Customer Use Only)**

☐ **SIGNATURE REQUIRED** Note: The addressee must check for "Signature Required" in the delivery instructions. If the box is not checked, the Postal Service will leave the package at the addressee's location without attempting to obtain the addressee's signature.

☐ No Saturday Delivery (delivered on business days)  
☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:00 AM Delivery (additional fee, where available)  
 \*Refer to USPS.com or local Post Office for availability.

TO: (Print or type) (Firm, company, or individual)  
 Scorpion Fitness, Inc.  
 325 Fifth Avenue, Ste. 41E  
 New York, New York 10016

ZIP + 4® (U.S. ADDRESSES ONLY)  
 10016

For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
 \$100.00 Insurance included.

Amended notice of intent



**PRIORITY  
 \* MAIL \*  
 EXPRESS™**

**ORIGINAL POSTAL SERVICE USE ONLY**

☐ 2 Day ☐ Priority ☐ First-Class®

Scheduled Delivery Date (MM/DD/YYYY) 3/9

Scheduled Delivery Time ☐ 10:00 AM ☐ 3:00 PM ☒ 12:00 PM

1000 AM Delivery Fee \$

Insurance Fee \$ 27.00

Signature Required Fee \$

Weight 16.11 lbs

Dimensions 3 x 3 x 3

Delivery Address (MM/DD/YYYY) Time ☐ AM ☐ PM

Employee Signature

Delivery Address (MM/DD/YYYY) Time ☐ AM ☐ PM

Employee Signature

Labels: 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100

POSTAGE BY FIRST CLASS PERMIT NO. 1000 NEW YORK, NY 10007

2-CUSTOMER COPY

Amended Notice of Intent



AFFIDAVIT OF SERVICE

STATE OF NEW YORK }  
COUNTY OF NEW YORK } s.s.

I, Tara George being duly sworn, deposes and says:

I am not a party to this action, am over 18 years of age and reside in the Queens, New York.

On May 10, 2018, I served the within *NOTICE AND DEMAND TO REPLENISH AND PAY* upon:

Scorpion Fitness, Inc.  
220 Fifth Avenue,  
New York, New York 10001

Scorpion Fitness, Inc.  
88 Lexington Ave., Ste. 9D  
New York, New York 10016

Scorpion Club Ventures LLC  
220 Fifth Avenue,  
New York, New York 10001

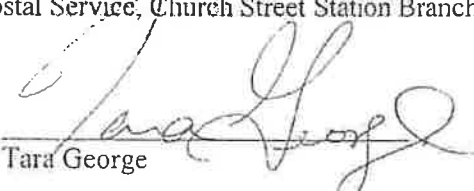
Scorpion Club Ventures LLC  
88 Lexington Ave., Ste. 9D  
New York, New York 10016

Scorpion Fitness, Inc.  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016


Massimo F. D'Angelo  
ADAM LEITMAN BAILEY, P.C.  
One Battery Park Plaza, Eighteenth Floor  
New York, New York 10004

Scorpion Club Ventures LLC  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016

by mailing the same first class with certificates of mailing in sealed envelopes, with postage prepaid thereon, in a post-office or official depository of the U.S. Postal Service within the State of New York, addressed to the addressees as indicated above and by overnight mail service (with Express Mail codes EF167483824US, EF167483775US, EF167483807US, EF167483798US, EF167483577US, EF167483550US, EF167483563US) by placing the same in a postpaid, properly addressed and sealed envelopes and delivering said envelopes to a postal employee at a United States Post Office in the Borough of Manhattan, City and State of New York for processing under the exclusive care and custody of the United States Postal Service, Church Street Station Branch, within the City, County and State of New York.

  
Tara George

Sworn to before me this  
11<sup>th</sup> day of May, 2018

  
Notary Public

JOSEPH SHALOM GOLDSMITH  
Notary Public, State of New York  
No. 02600108848  
Qualified in Queens County  
Commission Expires April 18, 20 20

**UNITED STATES POSTAL SERVICE** Certificate of Mailing

To pay fees, affix stamps or meter postage here

**\$1.40 0**  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

062S004.18

CHURCH STATION NEW YORK, NY 10007  
MAY 10 2018

From: Kossoff, PLLC  
217 Broadway - Suite 401  
New York, NY 10007

To: Scorpion Fitness, Inc.  
220 Fifth Avenue  
New York, New York 10001

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES POSTAL SERVICE** Certificate of Mailing

To pay fees, affix stamps or meter postage here

**\$1.40 0**  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

062S004.20

CHURCH STATION NEW YORK, NY 10007  
MAY 10 2018

From: Kossoff, PLLC  
217 Broadway - Suite 401  
New York, NY 10007

To: Scorpion Fitness, Inc.  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES POSTAL SERVICE** Certificate of Mailing

To pay fees, affix stamps or meter postage here

**\$1.40 0**  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

062S004.18

CHURCH STATION NEW YORK, NY 10007  
MAY 10 2018

From: Kossoff, PLLC  
217 Broadway - Suite 401  
New York, NY 10007

To: Scorpion Club Ventures LLC  
220 Fifth Avenue  
New York, New York 10001

S Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES POSTAL SERVICE** Certificate of Mailing

To pay fees, affix stamps or meter postage here

**\$1.40 0**  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

062S004.17

CHURCH STATION NEW YORK, NY 10007  
MAY 10 2018

From: Kossoff, PLLC  
217 Broadway - Suite 401  
New York, NY 10007

To: Scorpion Club Ventures LLC  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016

S Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES**  
**POSTAL SERVICE**  
Certificate of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing.  
This form may be used for domestic and international mail.

**\$1.40 0**  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

Kossoff, PLLC

217 Broadway – Suite 401

New York, NY 10007

To: Scorpion Club Ventures LLC

88 Lexington Ave, Ste. 9D

New York, New York 10016

PS Form 3817, April 2007 PSN 7530-02-000-9065



**UNITED STATES**  
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This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing.  
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US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

Kossoff, PLLC

217 Broadway – Suite 401

New York, NY 10007

To: Scorpion Fitness, Inc.

88 Lexington Ave, Ste. 9D

New York, New York 10016

PS Form 3817, April 2007 PSN 7530-02-000-9065



**UNITED STATES**  
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This form may be used for domestic and international mail.

**\$1.40 0**  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

Kossoff, PLLC

217 Broadway – Suite 401

New York, NY 10007

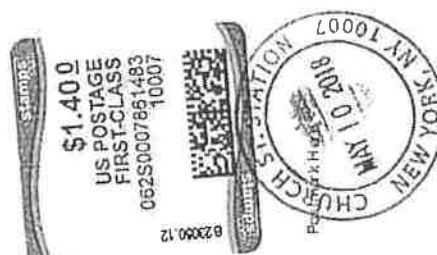
To: Massimo F. D'Angelo

Adam Leitman Bailey, P.C.

One Battery Park Plaza, Eighteenth Floor

New York, New York 10004

PS Form 3817, April 2007 PSN 7530-02-000-9065



**CUSTOMER USE ONLY**  
FROM: (PLEASE PRINT) PHONE ( ) 212-267-6364

MITCHELL H KOSSOFF ESQ  
KOSSOFF PLLC  
217 BROADWAY RM 401  
NEW YORK, NY 10007-2944



EF 167483775 US



UNITED STATES  
POSTAL SERVICE®

**PRIORITY  
MAIL  
EXPRESS™**

**PAYMENT BY ACCOUNT (if applicable)**  
USPS® Corporate Acct. No. Federal Agency Acct. No. or Postal Service™ Acct. No.

092004

**DELIVERY OPTIONS (Customer Use Only)**

☐ **SIGNATURE REQUIRED** (Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.)

**Delivery Options**

- ☐ No Saturday Delivery (delivered next business day)  
☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
\*Refer to USPS.com or local Post Office™ for availability.

TO: (PLEASE PRINT) PHONE ( )

Scorpion Club Ventures LLC  
220 Fifth Avenue  
New York, New York 10001

ZIP + 4® (U.S. ADDRESSES ONLY) 1 0 0 0 1 -

- For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
■ \$100.00 Insurance Included. (C.R.) 220Fifth, Scorpion  
Notice and Demand to Replenish and Pay

**ORIGIN (POSTAL SERVICE USE ONLY)**

<input checked="" type="checkbox"/> 1-Day	<input type="checkbox"/> 2-Day	<input type="checkbox"/> Military	<input type="checkbox"/> GPO
PO ZIP Code 10007	Scheduled Delivery Date (MM/DD/YYYY) 5-11-18	Postage 24.70	
Date Accepted (MM/DD/YYYY) 5-10-18	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input checked="" type="checkbox"/> BY NOON	Insurance Fee	COD Fee
Time Accepted 4:59 PM	10:30 AM Delivery Fee	Return Receipt Fee	Live Address Transportation Fee
Weight 2	Sunday/Holiday Premium Fee	Employee Signature	
Acceptance			

**DELIVERY (POSTAL SERVICE USE ONLY)**

Delivery Attempt (MM/DD/YYYY)	Time	Employee Signature
	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt (MM/DD/YYYY)	Time	Employee Signature
	<input type="checkbox"/> AM <input type="checkbox"/> PM	

LABEL 114, SEPTEMBER 2015 PSN 7600-01-000-9998 2-CUSTOMER COPY

**CUSTOMER USE ONLY**  
FROM: (PLEASE PRINT) PHONE ( ) 212-267-6364

MITCHELL H KOSSOFF ESQ  
KOSSOFF PLLC  
217 BROADWAY RM 401  
NEW YORK, NY 10007-2944



EF 167483824 US



UNITED STATES  
POSTAL SERVICE®

**PRIORITY  
MAIL  
EXPRESS™**

**PAYMENT BY ACCOUNT (if applicable)**  
USPS® Corporate Acct. No. Federal Agency Acct. No. or Postal Service™ Acct. No.

092004

**DELIVERY OPTIONS (Customer Use Only)**

☐ **SIGNATURE REQUIRED** (Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.)

**Delivery Options**

- ☐ No Saturday Delivery (delivered next business day)  
☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
\*Refer to USPS.com or local Post Office™ for availability.

TO: (PLEASE PRINT) PHONE ( )

Scorpion Fitness, Inc.  
220 Fifth Avenue  
New York, New York 10001

ZIP + 4® (U.S. ADDRESSES ONLY) 1 0 0 0 1 -

- For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
■ \$100.00 Insurance Included. (C.R.) 220Fifth, Scorpion  
Notice and Demand to Replenish and Pay

**ORIGIN (POSTAL SERVICE USE ONLY)**

<input checked="" type="checkbox"/> 1-Day	<input type="checkbox"/> 2-Day	<input type="checkbox"/> Military	<input type="checkbox"/> GPO
PO ZIP Code 10007	Scheduled Delivery Date (MM/DD/YYYY) 5-11-18	Postage 24.70	
Date Accepted (MM/DD/YYYY) 5-10-18	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input checked="" type="checkbox"/> BY NOON	Insurance Fee	COD Fee
Time Accepted 4:58 PM	10:30 AM Delivery Fee	Return Receipt Fee	Live Address Transportation Fee
Weight 2	Sunday/Holiday Premium Fee	Employee Signature	
Acceptance			

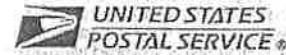
**DELIVERY (POSTAL SERVICE USE ONLY)**

Delivery Attempt (MM/DD/YYYY)	Time	Employee Signature
	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt (MM/DD/YYYY)	Time	Employee Signature
	<input type="checkbox"/> AM <input type="checkbox"/> PM	

LABEL 114, SEPTEMBER 2015 PSN 7600-01-000-9998 2-CUSTOMER COPY

**CUSTOMER USE ONLY**  
FROM: (PLEASE PRINT) PHONE: 212-267-6364

MITCHELL H KOSSOFF ESQ  
KOSSOFF PLLC  
217 BROADWAY RM 401  
NEW YORK, NY 10007-2944



**PRIORITY  
MAIL  
EXPRESS**

**PAYMENT BY ACCOUNT (if applicable)**  
USPS® Corporate Acct. No. 092004 Federal Agency Acct. No. or Postal Service® Acct. No.

**DELIVERY OPTIONS (Customer Use Only)**  
☐ **SIGNATURE REQUIRED** Note: The mailer must check the "Signature Required" box if the mailer:  
1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item at the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.  
**Delivery Options**  
☐ No Saturday Delivery (delivered next business day)  
☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
Refer to USPS.com® or local Post Office® for availability.

**TO: (PLEASE PRINT)** PHONE: ( )  
Scorpion Club Ventures LLC  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016  
ZIP: 4\* (U.S. ADDRESSES ONLY) 1 0 0 1 6

For pickup or USPS Tracking®, visit USPS.com or call 800-222-1811.  
\$100.00 Insurance Included. **C.R. 220 Fifth, Scorpion**  
**Notice and Demand to Replenish and Pay**

**ORIGIN (POSTAL SERVICE USE ONLY)**

<input checked="" type="checkbox"/> 1-Day PO ZIP Code: 10007 Date Accepted: 5.10.18 Time Accepted: 3:03 PM Weight: 2 lbs	<input type="checkbox"/> 2-Day Scheduled Delivery Date (MM/DD/YYYY): 5.11.18 Scheduled Delivery Time: 10:30 AM - 3:00 PM 10:30 AM Delivery Fee: \$ Acceptance Employee Initials: [Signature]	<input type="checkbox"/> Military Postage: \$24.70 Insurance Fee: \$ COD Fee: \$ Return Receipt Fee: \$ Live Arrival Transportation Fee: \$ Total Postage & Fees: \$24.70	<input type="checkbox"/> DPO
--	--	---	------------------------------

**DELIVERY (POSTAL SERVICE USE ONLY)**

Delivery Attempt (MM/DD/YYYY): Time: Employee Signature: [Signature]	Delivery Attempt (MM/DD/YYYY): Time: Employee Signature: [Signature]
--	--

LABEL 11-E, SEPTEMBER 2015 PSN 7695 02 000 0920 2-CUSTOMER COPY

**CUSTOMER USE ONLY**  
FROM: (PLEASE PRINT) PHONE: 212-267-6364

MITCHELL H KOSSOFF ESQ  
KOSSOFF PLLC  
217 BROADWAY RM 401  
NEW YORK, NY 10007-2944

**PAYMENT BY ACCOUNT (if applicable)**  
USPS® Corporate Acct. No. 092004 Federal Agency Acct. No. or Postal Service® Acct. No.

**DELIVERY OPTIONS (Customer Use Only)**  
☐ **SIGNATURE REQUIRED** Note: The mailer must check the "Signature Required" box if the mailer:  
1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item at the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.  
**Delivery Options**  
☐ No Saturday Delivery (delivered next business day)  
☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
Refer to USPS.com® or local Post Office® for availability.

**TO: (PLEASE PRINT)** PHONE: ( )  
Scorpion Fitness, Inc.  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016  
ZIP: 4\* (U.S. ADDRESSES ONLY) 1 0 0 1 6

For pickup or USPS Tracking®, visit USPS.com or call 800-222-1811.  
\$100.00 Insurance Included. **C.R. 220 Fifth, Scorpion**  
**Notice and Demand to Replenish and Pay**

**ORIGIN (POSTAL SERVICE USE ONLY)**

<input checked="" type="checkbox"/> 1-Day PO ZIP Code: 10007 Date Accepted: 5.10.18 Time Accepted: 5:01 PM Weight: 2 lbs	<input type="checkbox"/> 2-Day Scheduled Delivery Date (MM/DD/YYYY): 5.11.18 Scheduled Delivery Time: 10:30 AM - 3:00 PM 10:30 AM Delivery Fee: \$ Acceptance Employee Initials: [Signature]	<input type="checkbox"/> Military Postage: \$24.70 Insurance Fee: \$ COD Fee: \$ Return Receipt Fee: \$ Live Arrival Transportation Fee: \$ Total Postage & Fees: \$24.70	<input type="checkbox"/> DPO
--	--	---	------------------------------

**DELIVERY (POSTAL SERVICE USE ONLY)**

Delivery Attempt (MM/DD/YYYY): Time: Employee Signature: [Signature]	Delivery Attempt (MM/DD/YYYY): Time: Employee Signature: [Signature]
--	--

LABEL 11-E, SEPTEMBER 2015 PSN 7695 02 000 0920 2-CUSTOMER COPY



**CUSTOMER USE ONLY**  
FROM: (PLEASE PRINT) PHONE: 212-267-6364

MITCHELL H KOSSOFF ESQ  
KOSSOFF PLLC  
217 BROADWAY RM 401  
NEW YORK, NY 10007-2944

**PAYMENT BY ACCOUNT (if applicable)**  
USPS® Corporate Acct. No. 092004 Federal Agency Acct. No. or Postal Service™ Acct. No.

**DELIVERY OPTIONS (Customer Use Only)**  
☐ **SIGNATURE REQUIRED** Note: The addressee must check the "Signature Required" box if the addressee: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.  
**Delivery Options**  
☐ No Saturday Delivery (delivered next business day)  
☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
\*Refer to USPS.com or local Post Office for availability.

**TO: (PLEASE PRINT)** PHONE: 212-267-6364  
Scorpion Club Ventures LLC  
88 Lexington Ave, Ste 9D  
New York, New York 10016  
ZIP + 4® (U.S. ADDRESSES ONLY) 1 0 0 1 6 -

For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
\$100.00 Insurance Included. C.R. 220 Fifth, Scorpion  
Notice and Demand to Replenish and Pay



**ORIGIN (POSTAL SERVICE USE ONLY)**  
☐ 1-Day ☐ 2-Day ☐ Military ☐ DPO™

PO ZIP Code 10007 Scheduled Delivery Date (MM/DD/YYYY) 5.11.18  
Date Accepted (MM/DD/YYYY) 5.10.18 Scheduled Delivery Time 10:30 AM - 3:00 PM  
Time Accepted 5:07 AM 10:30 AM Delivery Fee \$  
Weight 2.00 lbs Flat Rate Sunday/Holiday Premium Fee \$  
Acceptance Employee Initials BB

**DELIVERY (POSTAL SERVICE USE ONLY)**  
Delivery Attempt (MM/DD/YYYY) Time AM PM Employee Signature  
Delivery Attempt (MM/DD/YYYY) Time AM PM Employee Signature

LABEL 117, SEPTEMBER 2015 PSN 7595-02-000-9298 2-CUSTOMER COPY

**CUSTOMER USE ONLY**  
FROM: (PLEASE PRINT) PHONE: 212-267-6364

MITCHELL H KOSSOFF ESQ  
KOSSOFF PLLC  
217 BROADWAY RM 401  
NEW YORK, NY 10007-2944

**PAYMENT BY ACCOUNT (if applicable)**  
USPS® Corporate Acct. No. 092004 Federal Agency Acct. No. or Postal Service™ Acct. No.

**DELIVERY OPTIONS (Customer Use Only)**  
☐ **SIGNATURE REQUIRED** Note: The addressee must check the "Signature Required" box if the addressee: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.  
**Delivery Options**  
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☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
\*Refer to USPS.com or local Post Office for availability.

**TO: (PLEASE PRINT)** PHONE: 212-267-6364  
Scorpion Fitness, Inc.  
88 Lexington Ave, Ste. 9D  
New York, New York 10016  
ZIP + 4® (U.S. ADDRESSES ONLY) 1 0 0 1 6 -

For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
\$100.00 Insurance Included. C.R. 220 Fifth, Scorpion  
Notice and Demand to Replenish and Pay



**ORIGIN (POSTAL SERVICE USE ONLY)**  
☐ 1-Day ☐ 2-Day ☐ Military ☐ DPO™

PO ZIP Code 10007 Scheduled Delivery Date (MM/DD/YYYY) 5.11.18  
Date Accepted (MM/DD/YYYY) 5.10.18 Scheduled Delivery Time 10:30 AM - 3:00 PM  
Time Accepted 5:05 AM 10:30 AM Delivery Fee \$  
Weight 2.00 lbs Flat Rate Sunday/Holiday Premium Fee \$  
Acceptance Employee Initials BB

**DELIVERY (POSTAL SERVICE USE ONLY)**  
Delivery Attempt (MM/DD/YYYY) Time AM PM Employee Signature  
Delivery Attempt (MM/DD/YYYY) Time AM PM Employee Signature

LABEL 117, SEPTEMBER 2015 PSN 7595-02-000-9298 2-CUSTOMER COPY

**CUSTOMER USE ONLY**

FROM: (PLEASE PRINT) PHONE: 212-267-6364

MITCHELL H KOBSSOFF ESQ  
KOSOFF PLLC  
217 BROADWAY RM 401  
NEW YORK, NY 10007-2944

**PAYMENT BY ACCOUNT (If applicable)**

USPS® Corporate Acct. No. 092004 Federal Agency Acct. No. or Postal Service® Acct. No.

**DELIVERY OPTIONS (Customer Use Only)**

☐ SIGNATURE REQUIRED (Note: The addressee must check the "Signature Required" box & the addressee must sign the addressee's signature. OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.

**Delivery Options**

☐ No Saturday Delivery (delivered next business day)  
☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
\*Refer to USPS.com® or local Post Office® for availability.

TO: (PLEASE PRINT) PHONE:

Massimo F. D'Angelo  
Adam Leitman Bailey, P.C.  
One Battery Park Plaza, Eighteenth Floor  
New York, New York 10004

ZIP + 4® (U.S. ADDRESSES ONLY) 10004-0004

For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
\$100.00 insurance included. (C.R.) 220 Fifth, Scorpion  
Notice and Demand to Deplenish and Pay



**PRIORITY  
★ MAIL ★  
EXPRESS™**

**ORIGIN (POSTAL SERVICE USE ONLY)**

☒ 1-Day ☐ 2-Day ☐ Military ☐ GPO

ZIP Code: 10004 Scheduled Delivery Date (MM/DD/YYYY): 3.11.18 Postage: \$24.70

Date Accepted (MM/DD/YYYY): 5.10.18 Scheduled Delivery Time: ☐ 10:30 AM ☐ 2:00 PM ☒ 12 NOON - 1:00 PM Insurance Fee: \$3.00 COD Fee: \$0.00

Time Accepted: 4:56 10:30 AM Delivery Fee: \$0.00 Return Receipt Fee: \$0.00 The Addressee's Signature: [Signature]

Weight: 2.00 lbs. Sundry/Holiday Premium Fee: \$0.00 Total Postage & Fees: \$27.70

Accepted Employee Name: [Signature] Accepted Employee Title: [Signature]

**DELIVERY (POSTAL SERVICE USE ONLY)**

Delivery Attempt (MM/DD/YYYY): Title: Employee Signature: [Signature]

Delivery Attempt (MM/DD/YYYY): Title: Employee Signature: [Signature]

CANCEL 11-6, SEPTEMBER 2015 PSN 7850-02-000-9998 2-CUSTOMER COPY

Notice and Demand to Replenish and Pay



AFFIDAVIT OF SERVICE

STATE OF NEW YORK }  
COUNTY OF NEW YORK } s.s.

I, Tara George being duly sworn, deposes and says:

I am not a party to this action, am over 18 years of age and reside in the Queens, New York.

On May 29, 2018, I served the within **NOTICE OF DEFAULT** upon:

Scorpion Fitness, Inc.  
220 Fifth Avenue,  
New York, New York 10001

Scorpion Fitness, Inc.  
88 Lexington Ave., Ste. 9D  
New York, New York 10016

Scorpion Club Ventures LLC  
220 Fifth Avenue,  
New York, New York 10001

Scorpion Club Ventures LLC  
88 Lexington Ave., Ste. 9D  
New York, New York 10016

Scorpion Fitness, Inc.  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016

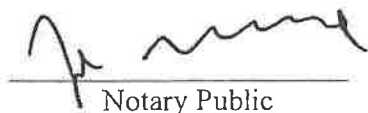
Massimo F. D'Angelo  
ADAM LEITMAN BAILEY, P.C.  
One Battery Park Plaza, Eighteenth Floor  
New York, New York 10004

Scorpion Club Ventures LLC  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016

by mailing the same first class with certificates of mailing in sealed envelopes, with postage prepaid thereon, in a post-office or official depository of the U.S. Postal Service within the State of New York, addressed to the addressees as indicated above and by overnight mail service (with Express Mail codes EF167483679US, EF167483665US, EF167483648US, EF167483722US, EF167483719US, EF167483651US, EF167483705US) by placing the same in a postpaid, properly addressed and sealed envelopes and delivering said envelopes to a postal employee at a United States Post Office in the Borough of Manhattan, City and State of New York for processing under the exclusive care and custody of the United States Postal Service, Church Street Station Branch, within the City, County and State of New York.

  
Tara George

Sworn to before me this  
30<sup>th</sup> day of May, 2018

  
Notary Public

JOSEPH SHALOM GOLDSMITH  
Notary Public, State of New York  
No. 02GO6108848  
Qualified in Queens County  
Commission Expires April 18, 2020

**UNITED STATES POSTAL SERVICE** Certificate of Mailing  
This Certificate of Mailing provides evidence that mail has been presented to USPS for mailing. This form may be used for domestic and international mail.  
From: Kossoff, PLLC  
217 Broadway - Suite 401  
New York, NY 10007  
To: Scorpion Club Ventures LLC  
220 Fifth Avenue  
New York, New York 10001  
Postmark Here  
USPS \$1.40 0  
US POSTAGE FIRST-CLASS  
062S0007861483  
10007

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES POSTAL SERVICE** Certificate of Mailing  
This Certificate of Mailing provides evidence that mail has been presented to USPS for mailing. This form may be used for domestic and international mail.  
From: Kossoff, PLLC  
217 Broadway - Suite 401  
New York, NY 10007  
To: Scorpion Club Ventures LLC  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016  
Postmark Here  
USPS \$1.40 0  
US POSTAGE FIRST-CLASS  
062S0007861483  
10007

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES POSTAL SERVICE** Certificate of Mailing  
This Certificate of Mailing provides evidence that mail has been presented to USPS for mailing. This form may be used for domestic and international mail.  
From: Kossoff, PLLC  
217 Broadway - Suite 401  
New York, NY 10007  
To: Scorpion Fitness, Inc.  
220 Fifth Avenue  
New York, New York 10001  
Postmark Here  
USPS \$1.40 0  
US POSTAGE FIRST-CLASS  
062S0007861483  
10007

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES POSTAL SERVICE** Certificate of Mailing  
This Certificate of Mailing provides evidence that mail has been presented to USPS for mailing. This form may be used for domestic and international mail.  
From: Kossoff, PLLC  
217 Broadway - Suite 401  
New York, NY 10007  
To: Scorpion Fitness, Inc.  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016  
Postmark Here  
USPS \$1.40 0  
US POSTAGE FIRST-CLASS  
062S0007861483  
10007

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES**  
**POSTAL SERVICE**  
Certificate of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing. This form may be used for domestic and international mail.

From:

Kossoff, PLLC  
217 Broadway – Suite 401  
New York, NY 10007

To:

Scorpion Club Ventures LLC  
88 Lexington Ave. Ste. 9D  
New York, New York 10016

Postmark Here

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES**  
**POSTAL SERVICE**  
Certificate of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing. This form may be used for domestic and international mail.

From:

Kossoff, PLLC  
217 Broadway – Suite 401  
New York, NY 10007

To:

Scorpion Fitness, Inc.  
88 Lexington Ave. Ste. 9D  
New York, New York 10016

Postmark Here

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES**  
**POSTAL SERVICE**  
Certificate of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing. This form may be used for domestic and international mail.

From:

Kossoff, PLLC  
217 Broadway – Suite 401  
New York, NY 10007

To:

Massimo F. D'Angelo  
Adam Leiman Bailey P.C.  
One Bakery Square Plaza, Eleventh Floor  
New York, New York 10014

Postmark Here

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES**  
**POSTAL SERVICE**  
Certificate of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing. This form may be used for domestic and international mail.

From:

Kossoff, PLLC  
217 Broadway – Suite 401  
New York, NY 10007


To:

Scorpion Fitness, Inc.  
88 Lexington Ave. Ste. 9D  
New York, New York 10016

Postmark Here

PS Form 3817, April 2007 PSN 7530-02-000-9065

CUSTOMER USE ONLY	
FROM: (PLEASE PRINT) MITCHELL H KOSSOFF ESQ KOSSOFF PLLC 217 BROADWAY RM 401 NEW YORK, NY 10007-2944	PHONE: ( ) 212-267-6364
220 Fifth Avenue New York, NY 10001	
PAYMENT BY ACCOUNT (if applicable) USPS Corporate Acct. No. 092004	
FEDERAL AGENCY Acct. No. or Postal Service™ Acct. No.	
DELIVERY OPTIONS (Customer Use Only) <input type="checkbox"/> SIGNATURE REQUIRED (Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item to the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.	
Delivery Options <input type="checkbox"/> No Saturday Delivery (delivered next business day) <input type="checkbox"/> Sunday/Holiday Delivery Required (additional fee, where available) <input type="checkbox"/> 10:30 AM Delivery Required (additional fee, where available) *Refer to USPS.com or local Post Office for availability.	
TO: (PLEASE PRINT) Scorpion Fitness Inc. 220 Fifth Avenue New York, New York 10001	
ZIP + 4 (U.S. ADDRESSES ONLY) 10001	
For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811. \$100.00 insurance included. Re: default notice.	



EF 167483679 US

**PRIORITY MAIL EXPRESS**

UNITED STATES POSTAL SERVICE

ORIGIN (POSTAL SERVICE USE ONLY)	
<input type="checkbox"/> 1-Day PO ZIP Code	<input type="checkbox"/> 2-Day Scheduled Delivery Date (MM/DD/YYYY)
Date Accepted (MM/DD/YYYY) <input type="checkbox"/> AM <input type="checkbox"/> PM	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input type="checkbox"/> 12 NOON
Time Accepted <input type="checkbox"/> AM <input type="checkbox"/> PM	10:30 AM Delivery Fee \$
Weight lbs. ozs.	Sunday/Holiday Premium Fee \$
Acceptance Employee Initials	Acceptance Employee Initials
DELIVERY (POSTAL SERVICE USE ONLY)	
Delivery Attempt (MM/DD/YYYY) <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Delivery Attempt (MM/DD/YYYY) <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature

2-CUSTOMER COPY

**CUSTOMER USE ONLY**  
 FROM: PLEASE PRINT  
 MITCHELL H KOSSOFF ESQ  
 KOSSOFF PLLC  
 217 BROADWAY RM 401  
 NEW YORK, NY 10007-2944  
 PHONE ( ) 212 267 6364  
 220 Fifth Avenue (AKN)  
 AVENUE BY ACCOUNT (if applicable)  
 952004  
 Federal Agency Acct. No. of Postal Service<sup>SM</sup> Acct. No.

**DELIVERY OPTIONS (Customer Use Only)**  
 SIGNATURE REQUIRED: The mailer must check the "Signature Required" box if the mailer:  
 1) requires the addressee's signature; OR 2) purchases additional insurance; OR 3) purchases COD service; OR 4) is insured by the addressee's signature; OR 5) is insured by the addressee's signature; OR 6) is insured by the addressee's signature.  
 Delivery Options:  
☐ No Saturday Delivery (delivered next business day)  
☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
 \*Refer to USPS.com<sup>®</sup> or local Post Office<sup>®</sup> for availability.

3. (PLEASE PRINT)  
 Scorpion Club Ventures LLC  
 220 Fifth Avenue  
 New York, New York 10001  
 PHONE ( )

4. (U.S. ADDRESSES ONLY)  
 L O O D I -  
 or pickup or USPS Tracking<sup>SM</sup>, visit USPS.com or call 800-222-1811.  
 100.00 insurance included.  
 De-fault notice

EF 167483665 US  
 UNITED STATES  
 POSTAL SERVICE<sup>®</sup>  
 PRIORITY  
 MAIL<sup>®</sup>  
 EXPRESS<sup>™</sup>

**ORIGIN (POSTAL SERVICE USE ONLY)**  
☐ 1-Day  
☐ 2-Day  
☐ Military  
☐ DPO  
 PO ZIP Code  
 Scheduled Delivery Date (MM/DD/YYYY)  
 Postage  
 Insurance Fee  
 COD Fee  
 Return Receipt Fee  
 Live Animal Transportation Fee  
 Total Postage & Fees  
 Date Accepted (MM/DD/YYYY)  
 Scheduled Delivery Time  
 10:30 AM ☐ 3:30 PM ☐  
 12 NOON ☐  
 Time Accepted  
 10:30 AM ☐ Delivery Fee  
 \$  
 Sunday/Holiday Premium Fee  
 \$  
 Acceptance Employee Initials  
 Weight  
 Flat Rate ☐ Flat Rate ☐  
 oz. lb.

**DELIVERY (POSTAL SERVICE USE ONLY)**  
 Delivery Attempt (MM/DD/YYYY) Time  
 Employee Signature  
 Delivery Attempt (MM/DD/YYYY) Time  
 Employee Signature  
 LABEL 11 SEPTEMBER 2015 PSN789002-000-3938  
 2-CUSTOMER COPY

**2-CUSTOMER COPY**

<b>CUSTOMER USE ONLY</b> FROM: (PLEASE PRINT) MITCHELL H KOSSOFF ESQ KOSSOFF PLLC 217 BROADWAY RM 401 NEW YORK, NY 10007-2944 PHONE: 212 267 6364		<b>POSTAL SERVICE</b> UNITED STATES PRIORITY MAIL EXPRESS <sup>TM</sup> EFT 167483722 US	
325 Corporate Acct. No. 220 Fifth Avenue (ASIN) 092004		Federal Agency Acct. No. in Postal Service <sup>SM</sup> Acct. No.	
<b>DELIVERY OPTIONS (Customer Use Only)</b> SIGNATURE REQUIRED: (The mailer must check the "Signature Required" box if the mailer: 1) requires the addressee's signature; OR 2) purchases additional insurance; OR 3) purchases COD service; OR 4) requires Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's residence or other secure location without attempting to obtain the addressee's signature on delivery.) Delivery Options: <input type="checkbox"/> No Saturday Delivery (delivered next business day) <input type="checkbox"/> Sunday/Holiday Delivery Required (additional fee, where available*) <input type="checkbox"/> 10:30 AM Delivery Required (additional fee, where available*) *Refer to USPS.com or local Post Office <sup>SM</sup> for availability.			
3: PLEASE PRINT Scorpion Club Ventures LLC 325 Fifth Avenue, Ste. 41E New York, New York 10016 PHONE: 212 267 6364		P + 4* (U.S. ADDRESSES ONLY) 1 D 0 1 6 -	
For pickup or USPS Tracking <sup>SM</sup> , visit USPS.com or call 800-222-1811. \$100.00 Insurance included. Default notice			
<b>ORIGIN (POSTAL SERVICE USE ONLY)</b> PO ZIP Code Scheduled Delivery Date (MMDDYY) Scheduled Delivery Time Insurance Fee COD Fee Live Animal Transportation Fee Return Receipt Fee Total Postage & Fees to be Paid Employee Signature Delivery Attempt (MMDDYY) Time Employee Signature Delivery Attempt (MMDDYY) Time			
<b>DELIVERY (POSTAL SERVICE USE ONLY)</b> Delivery Attempt (MMDDYY) Time Employee Signature Delivery Attempt (MMDDYY) Time Employee Signature			
LABEL 115, SEPTEMBER 2015 PSN 7690-03-000-9926 2-CUSTOMER COPY			



**CUSTOMER USE ONLY**  
FROM: (PLEASE PRINT)

PHONE ( ) 212 267 6264  
MITCHELL H KOSOFF ESQ  
KOSOFF PLLC  
217 BROADWAY RM 401  
NEW YORK, NY 10007-2944

220 Fifth Avenue (AKM)

**PAYMENT BY ACCOUNT (if applicable)**  
USPS® Corporate Acct. No. Federal Agency Acct. No. or Postal Service™ Acct. No.  
092004

**DELIVERY OPTIONS (Customer Use Only)**

- ☐ **SIGNATURE REQUIRED** Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle at their secure location without attempting to obtain the addressee's signature on delivery.
- Delivery Options**
- ☐ No Saturday Delivery (delivered next business day)  
☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
\*Refer to USPS.com® or local Post Office® for availability.

**TO: (PLEASE PRINT)**

Scorpion Fitness, Inc.  
88 Lexington Ave., Ste. 9D  
New York, New York 10016

**ZIP + 4® (U.S. ADDRESSES ONLY)**

10016

- For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.
- \$100.00 insurance included.

Default notice



EF 167483719 US



**PRIORITY  
MAIL  
EXPRESS™**

ORIGIN (POSTAL SERVICE USE ONLY)	
<input type="checkbox"/> 1-Day PO ZIP Code	<input type="checkbox"/> 2-Day Scheduled Delivery Date (MM/DD/YY)
Date Accepted (MM/DD/YY)	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM - <input type="checkbox"/> 3:00 PM <input type="checkbox"/> 12 NOON
Time Accepted <input type="checkbox"/> AM <input type="checkbox"/> PM	10:30 AM Delivery Fee <input type="checkbox"/> S
Weight <input type="checkbox"/> Flat Rate cwt.	Sunday/Holiday Premium Fee <input type="checkbox"/> S
Accompanying Employee Initials	
Employee Signature	
Delivery Attempt (MM/DD/YY) Time <input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt (MM/DD/YY) Time <input type="checkbox"/> AM <input type="checkbox"/> PM	
Employee Signature	

DELIVERY (POSTAL SERVICE USE ONLY)	
Delivery Attempt (MM/DD/YY) Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Delivery Attempt (MM/DD/YY) Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature

2-CUSTOMER COPY  
LABEL 11P SEPTEMBER 2015 PSN 7625-02-000-9938



2-CUSTOMER COPY

**CUSTOMER USE ONLY**  
FROM: (PLEASE PRINT) PHONE: 1-212-267-6364  
MITCHELL H KOSSOFF ESQ  
KOSSOFF PLLC  
217 BROADWAY RM 401  
NEW YORK, NY 10007-2944

2705 5th Avenue (AKM)  
PAYMENT BY ACCOUNT (if applicable)  
USPS® Corporate Acct. No. Federal Agency Acct. No. or Postal Service™ Acct. No.

092004

**DELIVERY OPTIONS (Customer Use Only)**

- ☐ **SIGNATURE REQUIRED** Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the mail in the addressee's mailbox. Signature of mailer or addressee is required to obtain the addressee's signature on delivery.
- ☐ **NO SUNDAY DELIVERY** (delivered next business day)  
☐ **SUNDAY/HOLIDAY DELIVERY** Required (additional fee, where available)  
☐ **10:30 AM DELIVERY** Required (additional fee, where available)  
\*Refer to USPS.com or local Post Office for availability.

TO: (PLEASE PRINT)

Massimo F. D'Angelo  
Adam Lettman Bailey, P.C.  
One Battery Park Plaza, Eighteenth Floor  
New York, New York 10004

ZIP + 4® U.S. ADDRESSES ONLY

1 0 0 0 4 -

For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.

\$100.00 Insurance Included.

Default notice



EF 167483705 US

**UNITED STATES  
POSTAL SERVICE®**  
**PRIORITY  
MAIL™  
EXPRESS™**

ORIGIN (POSTAL SERVICE USE ONLY)	
<input type="checkbox"/> 1-Day PG ZIP Code	<input type="checkbox"/> 2-Day Scheduled Delivery Date (MM/DD/YYYY)
Date Accepted (MM/DD/YYYY)	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM - <input type="checkbox"/> 3:00 PM <input type="checkbox"/> 12 NOON
Time Accepted <input type="checkbox"/> AM <input type="checkbox"/> PM	10:30 AM Delivery Fee \$
Weight <input type="checkbox"/> Flat Rate <input type="checkbox"/> oz. lbs.	Sunday/Holiday Premium Fee \$ Acceptance Employee Initials
Postage \$	
Insurance Fee \$	COO Fee \$
Return Receipt Fee \$	Live Animal Transportation Fee \$
Total Postage & Fees \$	

DELIVERY (POSTAL SERVICE USE ONLY)	
Delivery Attempt (MM/DD/YYYY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM
Delivery Attempt (MM/DD/YYYY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM
Employee Signature	Employee Signature

LABEL 11-F, SEPTEMBER 2015 PSN 759002 000 3938 2-CUSTOMER COPY

*Exhibit "C"*

**SUPPLEMENTAL NOTICE OF DEFAULT**

---

**TO:** Scorpion Fitness Inc. and Scorpion Club Ventures, LLC ("Tenant")  
and John Shams ("Guarantor").

**PREMISES:** All rooms/areas of a portion of the ground floor, mezzanine, and lower level, as shown hatched on the floor plans annexed hereto as **Exhibit 1** and incorporated by reference as if fully set forth in length, in the building known as and located at 220 Fifth Avenue, New York, New York 10001.

**LEASE:** dated December 19, 2014, by and between Landlord's predecessor-in-interest, Dino & Sons Realty Corp., as landlord, and Tenant, as tenant. Said Lease being modified by a First Lease Modification Agreement, dated June 30, 2017.

**GUARANTY:** dated December 22, 2014, by Guarantor, as guarantor.

**DATE OF THIS NOTICE:** October 26, 2018.

**PLEASE TAKE NOTICE** that Tenant is in default of Articles 3, 13, 17, 47(a), 47(b), 47(c), 47(d), 47(f), 53, 58, and 69 of the Lease and Article 4 of the First Lease Modification Agreement, which provisions deal in pertinent part with Tenant's obligations: (a) to, on or before December 31, 2017, complete all of Tenant's Work in full compliance with law, and violation and lien free and fully open for business to the public within the Premises as a fully operable physical fitness center with reasonable, regular daily hours of operation; (b) to comply with all laws, rules, orders, ordinances, and regulations at any time issued or in force of the Federal, State and Local Governments, and of each and every department, bureau and official thereof; (c) to provide the Landlord access to the Premises to examine and inspect the Premises and Tenant's Work; (d) to, prior to undertaking any alterations, obtain all permits, approvals and certificates and deliver the same to Landlord; (e) to obtain prior written approval from Landlord of all alterations, of contractors retained by Tenant, and of all contractors undertaking work in the Premises on Tenant's behalf; (f) to hire contractors that will not interfere or cause conflict with other contractors or laborers at the building; (g) to use contractors that maintain the required insurance and furnish evidence of said insurance for all contractors to the Landlord; (h) to undertake alterations in compliance with plans approved by Landlord and by contractors approved by Landlord; and (i) what actions on Tenant's part are deemed defaults under the Lease.

**PLEASE TAKE FURTHER NOTICE**, more specifically, Tenant has violated and continue to violate the aforementioned provisions of the Lease by:

(i) failing, on or prior to December 31, 2017, to fully complete all of Tenant's Work and all other alterations necessary or desirable for the conduct of Tenant's business within the Premises (with all work performed in accordance with the Lease, in full compliance with law, and violation and lien free), in all events in full compliance with the terms and provisions of the Lease and fully open for business to the public within the demised premises as a fully operable physical fitness center with reasonable, regular daily hours of operation;

(ii) failing to have work and/or construction undertaken in the Premises in a good and workmanlike manner, by using contractors or laborers which have interfered or caused conflict with other contractors or laborers at the building, and by failing to maintain in effect permits for work and/or construction undertaken in the Premises. A copy of the list of permits for Job No: 122665188 showing all the permits are expired is annexed hereto as **Exhibit A** and incorporated by reference as if fully set forth in length;

(iii) failing to furnish evidence of the requisite insurance for all contractors or laborers employed by Tenant in the Premises;

(iv) having work and/or construction undertaken in the Premises in violation of New York City Construction Codes resulting in the issuance of two (2) Stop Work Orders, on September 25, 2018 and October 15, 2018, and the issuance of DOB Violation Nos. 092518C0502EH and 101118CSPOBA03, a copy of which is annexed hereto as **Exhibit B** and incorporated by reference as if fully set forth in length;

(v) continuing to have work and/or construction undertaken in the Premises in violation of the Stop Work Orders, without the prior written permission of the Landlord, without contractors submitted to the Landlord for approval, without permits from the NYC Department of Buildings, and without presenting proof that the contractors maintain the required insurance. Landlord has been advised of the same by four (4) contractors claiming to have done so at Tenant's behest. Letters and/or contracts signed by Tenant and received by Landlord from three (3) contractors unknown to Landlord who state they have undertaken work in the Premises at Tenant's direction in violation of the Stop Work Orders, without permits from the NYC Department of Buildings, and without presenting proof of insurance are collectively annexed hereto as **Exhibit C** and incorporated by reference as if fully set forth in length;

(vi) removing the fire stair landing door without the permission or consent of Landlord, in violation of the plans approved by the NYC Department of Buildings, without proper permits, and in violation with law, a photograph of which is annexed hereto as **Exhibit D** and incorporated by reference as if fully set forth in length;

(vii) removing the wall and fire proof self-closing doors on the plans approved by the NYC Department of Buildings, as shown on the plans annexed hereto as **Exhibit E** and incorporated by reference as if fully set forth in length, without approval from the Landlord or the NYC Department of Buildings and without permits from the NYC Department of Buildings and which has a material and adverse effect on the building, its systems and/or facilities; and

(viii) installing a two by four piece of wood to block access to the Premises and the emergency egress into and out of the Premises resulting in the issuance on 08/29/2018 of ECB Violation Nos. 35355136J and 35355135H, a copy of which is annexed hereto as **Exhibit F** and incorporated by reference as if fully set forth in length.

**PLEASE TAKE FURTHER NOTICE** that, in accordance with Articles 17 and 31 of the Lease, you are hereby required cure such defaults **on or before November 15, 2018**, that being more than

fifteen (15) days after service of this Notice upon you, and, upon Tenant's failure to so cure, the Landlord will elect to terminate Tenant's tenancy in accordance with Article 17 of the Lease.

**PLEASE TAKE FURTHER NOTICE**, this Notice is served upon you pursuant to Articles 17, 27, and 31 of the Lease and other applicable provisions of law and/or statutes.

**PLEASE TAKE FURTHER NOTICE**, that this Notice will not serve to vitiate a certain Notice of Default, dated May 29, 2018, and served upon you, is being served upon you without prejudice to a certain Notice of Default, dated May 29, 2018, and is merely being served as a supplement of additional defaults and breaches that must be cured and which act as a separate and independent notice and basis for Tenant's ouster from the Premises in not cured in accordance with this Notice and in the event the Landlord fails to secure Tenant's ouster from the Premises pursuant to the aforementioned Notice of Default, dated May 29, 2018.

**PLEASE TAKE FURTHER NOTICE**, pursuant to Sections 19, 31, and 51(B) of the Lease, you are responsible for any and all legal expenses and attorneys' fees incurred by the Landlord.

**PLEASE TAKE FURTHER NOTICE**, that any response to this Notice must be sent and directed to the below-named attorneys for the Landlord.



Kossoff, PLLC  
Attorneys for Landlord  
By: Joseph Goldsmith, Esq.  
217 Broadway, Suite 401  
New York, New York 10007  
Tel.: (212) 267-6364  
Email: jgoldsmith@kaulaw.com

220 FIFTH REALTY LLC

[Landlord]



By: Pawan Melgiri  
Title: Senior Vice President & Authorized  
Signatory

*Exhibit "1"*

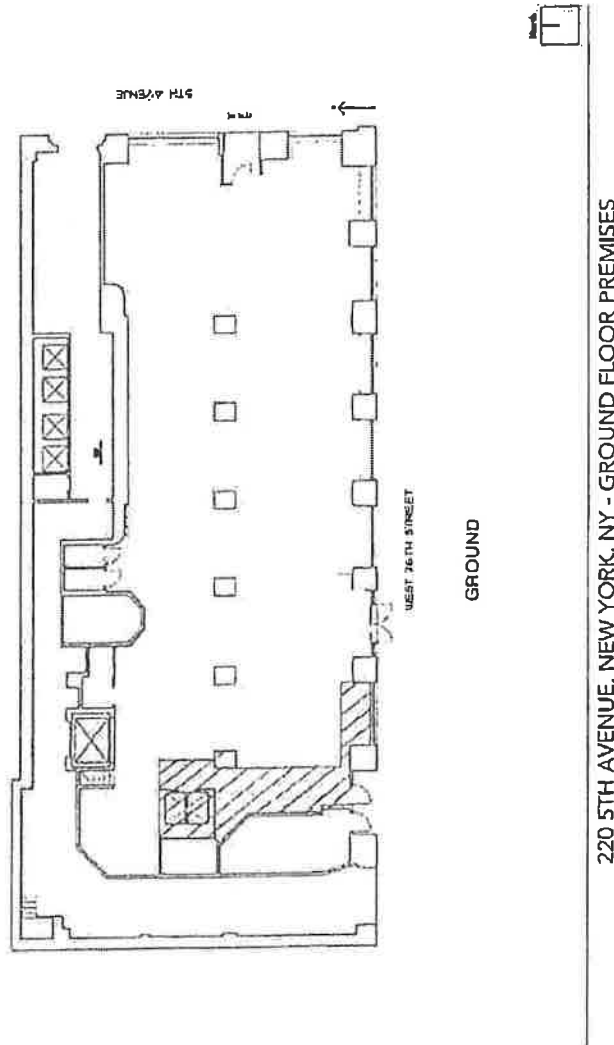
Execution

12/19/2014

Page 31 of 47

The Demised Premises

Not to scale; all dimensions approximate; subject to actual conditions.



23

Please Initial Here: Landlord

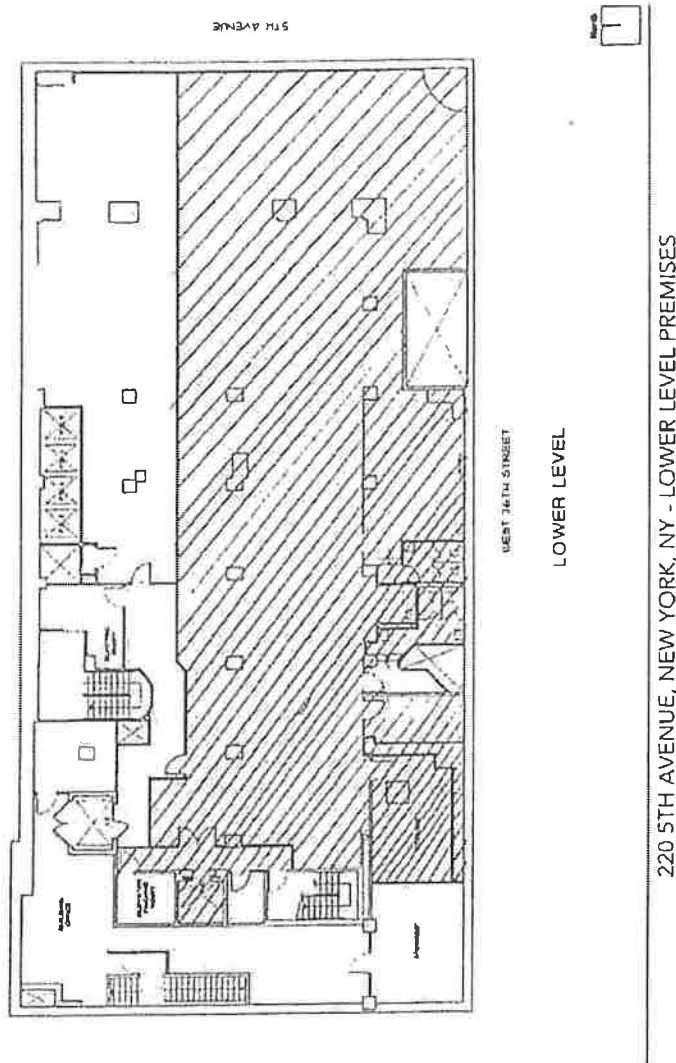
\_\_\_\_\_  
F. Smith



Execution

12/19/2014

Page 32 of 47



24

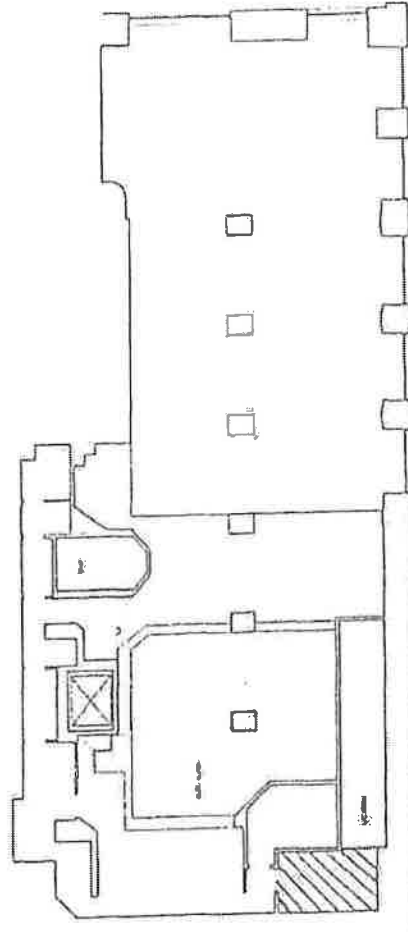
Please Initial Here. Landlord

Tennant

Execution

12/19/2014

Page 33 of 47



MEZZANINE

25

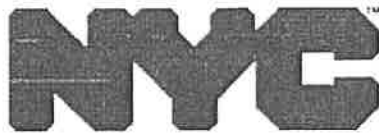
Please Initial Here: Landlord

Tennant

*Exhibit "A"*

10/19/2018

Issued and Possible Permits



**Buildings**



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NYC Department of Buildings  
**Issued and Possible Permits**

Premises: 218 5 AVENUE MANHATTAN

Job No: 122665188

BIN: 1015650 Block: 828 Lot: 35

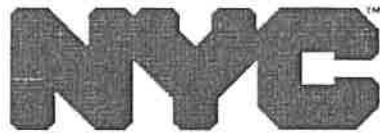
Job Type: A2 - ALTERATION TYPE 2

PERMIT INFORMATION						
NUMBER-DOC-TYPE	HISTORY	SEQ NO	FIRST ISSUE DATE	LAST ISSUE DATE	STATUS	APPLCNT
<a href="#">122665188-01-EW OT</a>	<a href="#">History</a>	03	08/16/2016	10/16/2017	ISSUED	BRYANT
<a href="#">122665188-02-EW MH</a>	<a href="#">History</a>	03	08/16/2016	02/15/2018	ISSUED	ALLICK
<a href="#">122665188-02-PL</a>	<a href="#">History</a>	02	08/23/2016	10/16/2017	ISSUED	ANAGNOSTO
<a href="#">122665188-03-EW OT</a>	<a href="#">History</a>	03	08/16/2016	10/16/2017	ISSUED	BRYANT

If you have any questions please review these [Frequently Asked Questions](#), the [Glossary](#), or call the 311 Citizen Service Center by dialing 311 or (212) NEW YORK outside of New York City.

10/26/2018

Permit History



**Buildings**



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NYC Department of Buildings

**Permit History**

Premises: 218 5 AVENUE MANHATTAN

Job No: 122665188

BIN: 1015650 Block: 828 Lot: 35

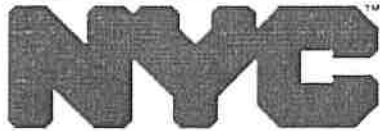
Job Type: A2 - ALTERATION TYPE 2

PERMIT INFORMATION						
PERMIT NUMBER	SUB TYPE	SEQ NO	ISSUE DATE	EXPIRATION DATE	STATUS	APPLICANT
<u>122665188-03-EW</u>	OT	01	08/16/2016	07/28/2017	T - ISSUED	PAUL GAMBINO
<u>122665188-03-EW</u>	OT	02	05/18/2017	05/01/2018	T - ISSUED	JOSEPH ANTHONY
<u>122665188-03-EW</u>	OT	03	10/16/2017	05/24/2018	T - ISSUED	PETER BRYANT

If you have any questions please review these [Frequently Asked Questions](#), the [Glossary](#), or call the 311 Citizen Service Center by dialing 311 or (212) NEW YORK outside of New York City.

10/26/2018

Permit History



**Buildings**



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NYC Department of Buildings

**Permit History**

Premises: 218 5 AVENUE MANHATTAN

Job No: 122665188

BIN: 1015650 Block: 828 Lot: 35

Job Type: A2 - ALTERATION TYPE 2

PERMIT INFORMATION						
PERMIT NUMBER	SUB TYPE	SEQ NO	ISSUE DATE	EXPIRATION DATE	STATUS	APPLICANT
<u>122665188-02-PL</u>		01	08/23/2016	08/23/2017	T - ISSUED	MARC BRESLAW
<u>122665188-02-PL</u>		02	10/16/2017	10/16/2018	T - ISSUED	JAMES ANAGNOSTOS

If you have any questions please review these [Frequently Asked Questions](#), the [Glossary](#), or call the 311 Citizen Service Center by dialing 311 or (212) NEW YORK outside of New York City.

10/26/2018

Permit History



**Buildings**



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NYC Department of Buildings

**Permit History**

Premises: 218 5 AVENUE MANHATTAN

Job No: 122665188

BIN: 1015650 Block: 828 Lot: 35

Job Type: A2 - ALTERATION TYPE 2

PERMIT INFORMATION						
PERMIT NUMBER	SUB TYPE	SEQ NO	ISSUE DATE	EXPIRATION DATE	STATUS	APPLICANT
<u>122665188-01-EW</u>	OT	01	08/16/2016	07/28/2017	T - ISSUED	PAUL GAMBINO
<u>122665188-01-EW</u>	OT	02	05/16/2017	05/01/2018	T - ISSUED	JOSEPH ANTHONY
<u>122665188-01-EW</u>	OT	03	10/16/2017	05/24/2018	T - ISSUED	PETER BRYANT

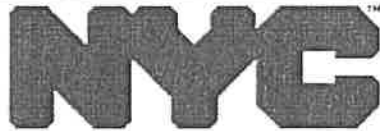
If you have any questions please review these [Frequently Asked Questions](#), the [Glossary](#), or call the 311 Citizen Service Center by dialing 311 or (212) NEW YORK outside of New York City.

*Exhibit "B"*



10/26/2018

Overview for Complaint #:1492389 = RESOLVED



**Buildings**



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NYC Department of Buildings

**Overview for Complaint #:1492389 = RESOLVED**

Complaint at: 220 5 AVENUE BIN: 1015650 Borough: MANHATTAN ZIP: 10001  
Re: SAFETY COMPLIANCE INSPECTION

Category Code: 1Z ENFORCEMENT WORK ORDER (DOB)  
ENFORCEMENT WORK ORDER : INTRA-AGENCY REFERRAL

Assigned To: EXECUTIVE INSPECTIONS

Priority: D

Received: 10/11/2018 Block: 828 Lot: 35 Community Board: 105  
Owner: DINO SON REALTY CORP

Last Inspection: 10/11/2018 - - BY BADGE # 2727  
Disposition: 10/15/2018 - L1 - PARTIAL STOP WORK ORDER  
DOB Violation #: 101118CSPOBA03  
ECB Violation #: 35361767R  
Comments: ACTIVE WOTRK@GROUND FL GYM WITH INTERIOR STAIR CASE MISSING ALL  
HAND/GUARD RAILS

**Complaint Disposition History**

#	Disposition	Disposition	Inspection	Date
	Date	Code	By	

If you have any questions please review these [Frequently Asked Questions](#), the [Glossary](#), or call the 311 Citizen Service Center by dialing 311 or (212) NEW YORK outside of New York City.

10/26/2018

Overview for Complaint #:1490546 = RESOLVED



**Buildings**



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NYC Department of Buildings

**Overview for Complaint #:1490546 = RESOLVED**

Complaint at: 220 FIFTH AVENUE BIN: 1015650 Borough: MANHATTAN ZIP: 10001  
Re: BOROUGH COMMISSIONER HAS ISSUE STOP WORK ORDER FOR PERMIT #122662188 DUE TO CONTRACTOR  
WITHDRAWAL

Category Code: 1X CONSTRUCTION ENFORCEMENT WORK ORDER (DOB)  
ENFORCEMENT WORK ORDER : INTER-AGENCY REFERRAL

Assigned To: MANHATTAN BOROUGH OFFICE

Priority: D

Received: 09/24/2018 Block: 828 Lot: 35 Community Board: 105  
Owner: X X

Last Inspection: 09/25/2018 -- BY BADGE # 2669  
Disposition: 09/25/2018 - L1 - PARTIAL STOP WORK ORDER  
DOB Violation #: 092518C0502EH/305844  
Comments: STOP WORK ORDER ISSUED TO APPLICATION/PERMITS #122662188, DUE TO  
CONTRACTOR WITHDRAWAL

**Complaint Disposition History**

#	Disposition Date Code	Disposition	Inspection By	Date
---	--------------------------	-------------	------------------	------

If you have any questions please review these [Frequently Asked Questions](#), the [Glossary](#), or call the 311 Citizen Service Center by dialing 311 or (212) NEW YORK outside of New York City.

10/19/2018

DOB Violation Display for 092518C0502EH



**Buildings**



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NYC Department of Buildings

**DOB Violation Display for 092518C0502EH**

Premises: 218 5 AVENUE MANHATTAN

BIN: 1015650 Block: 828 Lot: 35

Issue Date: 09/25/2018 Violation Category: V - DOB VIOLATION - ACTIVE

Violation Type: C - CONSTRUCTION

Violation Number: 0502EH

Device No.:

ECB No.:

Infraction Codes:

Description: THE BOROUGH COMMISSIONER HAS ISSUED A STOP WORK ORDER FOR APPLICATION/ PERMITS # 122662188 DUE TO CONTRACTOR WITHDRAWL. STOP ALL WORK, MAKE SITE SAFE, PROVIDE ALL REQUIRED INFORMATION TO BOROUGH COMMISSIONER'S OFFICE FORTHWITH

Disposition:

Code:

Date:

Inspector:

Comments:

If you have any questions please review these [Frequently Asked Questions](#), the [Glossary](#), or call the 311 Citizen Service Center by dialing 311 or (212) NEW YORK outside of New York City.

*Exhibit "C"*

September 26, 2018

Landlord  
220 Fifth Avenue  
New York, NY 10000

Re: Fitness Club in cellar work

Dear Sir,

I want to advise you that I have performed carpentry work for John Shams along with a lot of other contractors in the cellar level of your building. I performed carpentry work, removing existing work built by other contractors before me, and modifying and building new work the John wanted changed from the original plan. I built some new framing for walls and ceilings, sheetrock, took existing new ceilings down, built new ceilings with structural supports to the underside of the slab in the reception area, built lighting track coves, installed flooring in the studio, built millwork bases for lockers. John said he would pay in Cash. He gave me a small amount of money at the start, but did not pay any balance of money owed, and he has not allowed me back in to get my tools. He claims the tools have disappeared, but there are others working down there at night and weekends who have said they have seen my tools down there. These other men doing electrical, plumbing, and carpentry on the weekend are also owed money and are going to get attorneys to get paid. He never asked us to get insurance, he just wanted us to hurry and build and not let anyone know we were down there working. I am letting you know I will be getting an attorney or filing a lien to get the money owed to me.

I performed this work from September 10, 2018 through September 24, 2018.

Sincerely,  
  
Matthew Breen  
144 North 7<sup>th</sup> Street  
Brooklyn, NY 11211  
347.221.4043

October 12, 2018

Letter for:  
Security desk at 220 Fifth Avenue  
New York, NY 10001

I am Jamal Kazokov. I performed tile work in the cellar at 220 Fifth Avenue from September 30 to October 4, days and nights. I tiled the showers and set the plumbing drains. Mr. John Shams promised to pay me cash. He paid us nothing. I am getting an attorney to collect my money.

Signed:



Jamaladdin Kazokov (347) 962-4211

1245 Avenue H  
Apt 1P  
Brooklyn, NY 11235

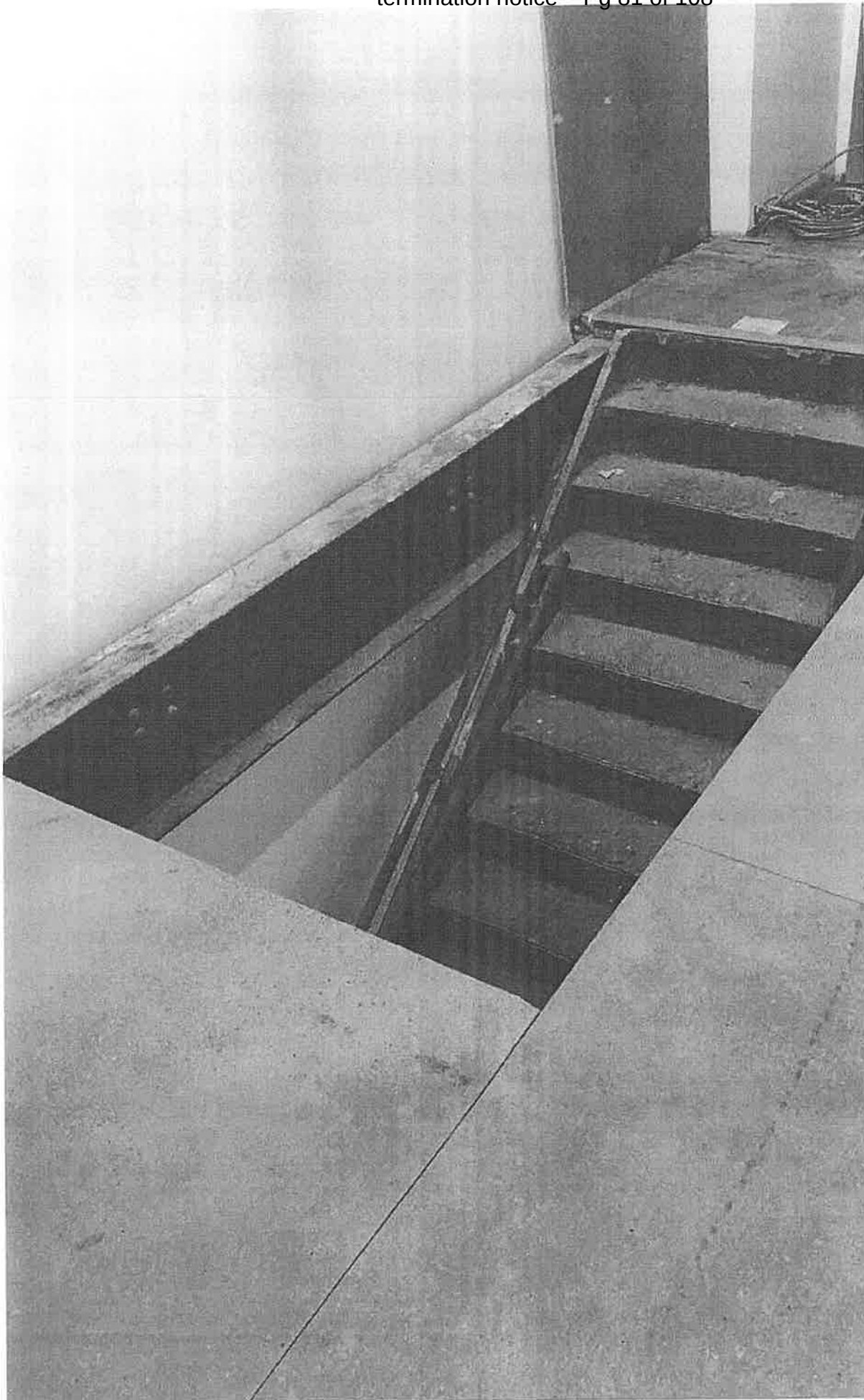
7/12/19

THIS IS TO STATE THAT  
MOTT BROS WILL BE PAID  
\$250 PER DAY FOR THE  
SCOPE OF WORK ON THIS  
PROJECT.

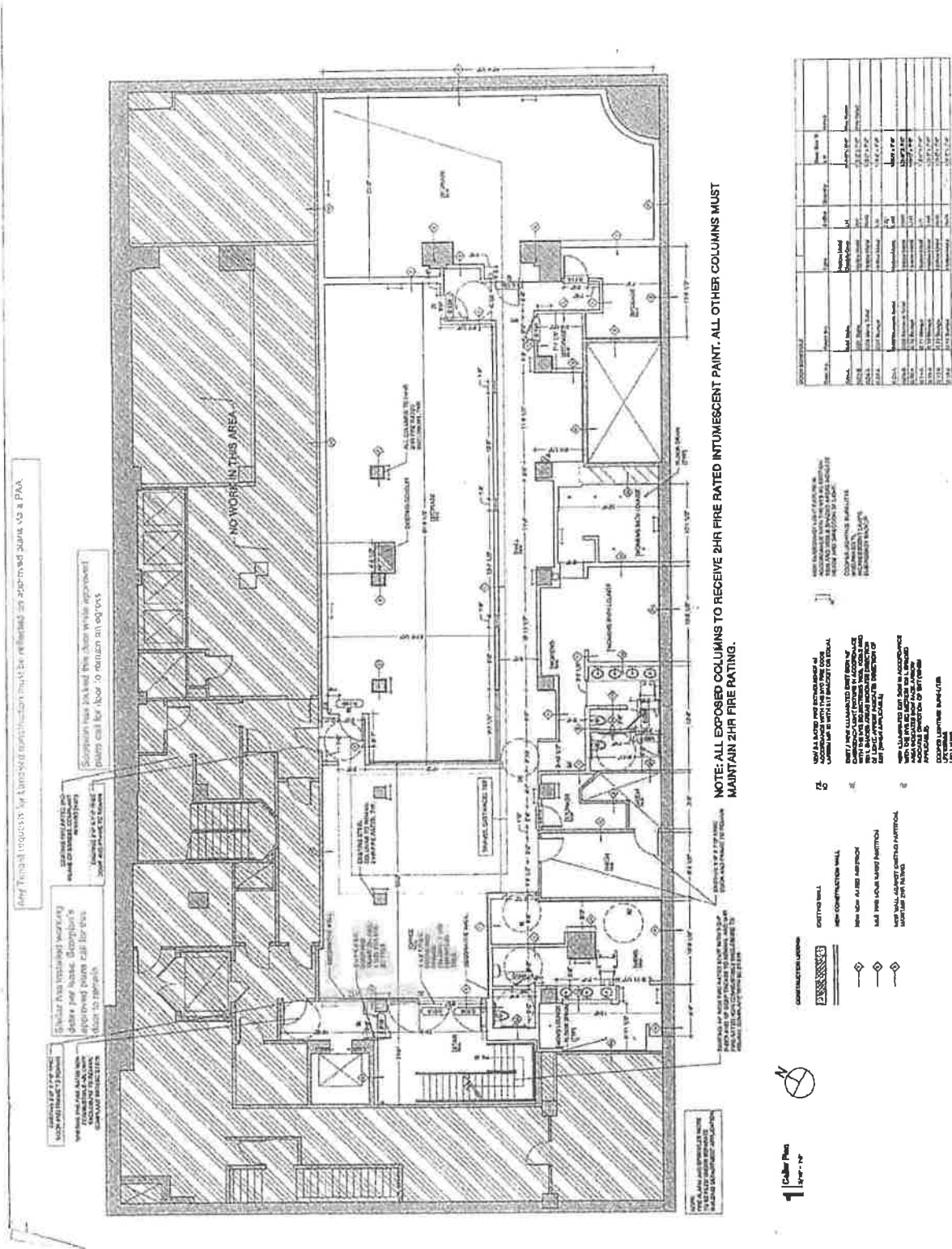
A handwritten signature in black ink, consisting of a stylized, cursive 'M' followed by a long horizontal stroke.

*Exhibit "D"*





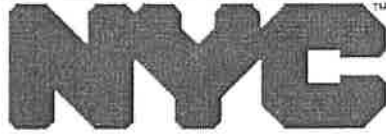
*Exhibit "E"*



*Exhibit "F"*

10/19/2018

ECB Violation Details



## Buildings

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NYC Department of Buildings

### ECB Violation Details

Premises: 218 5 AVENUE MANHATTAN

Filed At: 220 5 AVENUE , MANHATTAN , NY 10001

BIN: 1015650 Block: 828 Lot: 35

Community Board: 105

### ECB Violation Summary

**VIOLATION OPEN**

ECB Violation Number: 35355136J

Severity: CLASS - 1

Certification Status: NO COMPLIANCE RECORDED

Penalty Balance Due: \$0.00

Hearing Status: PENDING

### Respondent Information

Name: IDDC LLC GIC #617506

Mailing Address: 420 E 79 ST SUITE 2A , NEW YORK , NY 10075

### Violation Details

Violation Date: 08/29/2018

Violation Type: CONSTRUCTION

Served Date: 08/29/2018

Inspection Unit: EMERGENCY RESPONSE TEAM (ERT)

Infraction Codes	Section of Law	Standard Description
109	BC 3301.2,27-1009(A)	FAIL TO SAFEGUARD PERS/PROPERTY AFFECTED BY CONSTRUCTION OP

#### Specific Violation Condition(s) and Remedy:

FAILURE TO SAFEGUARD ALL PERSONS AND PROEPRTY AFFECTED BY CONSTRUCTIONOPERATION.NOTED:PREMISES 20 STORY COMMERCIAL BUILDING A GYM CONSTRUCTION IN PROGRESS UNDER PERMIT #122665188 AT 1ST FLOOR AND BASEMENT LEVEL

Issuing Inspector ID: 2748

DOB Violation Number: 10182018CERMA02

Issued as Aggravated Level: NO

### Dept. of Buildings Compliance History and Events

Certification Status: NO COMPLIANCE RECORDED

Compliance On:

A Certificate of Correction must be submitted to the Administrative Enforcement Unit (AEU) for all violations. A violation that is not dismissed by ECB will continue to remain ACTIVE or "open" on DOB records until acceptable proof is submitted to the AEU, even if you have paid the penalty imposed by ECB.

### ECB Hearing Information

Scheduled Hearing Date/Time: 10/18/2018 8:30

Hearing Status: PENDING

### ECB Penalty Information

Penalty Imposed: \$0.00

Adjustments: \$0.00

Amount Paid: \$0.00

Penalty Balance Due: \$0.00

If you have any questions please review these [Frequently Asked Questions](#), the [Glossary](#), or call the 311 Citizen Service Center by dialing 311 or (212) NEW YORK outside of New York City.



10/19/2018

ECB Violation Details



**Buildings**



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NYC Department of Buildings

**ECB Violation Details**

Premises: 218 5 AVENUE MANHATTAN

Filed At: 220 5 AVENUE , MANHATTAN , NY 10001

BIN: 1015650 Block: 828 Lot: 35

Community Board: 105

**ECB Violation Summary**

**VIOLATION OPEN**

ECB Violation Number: 35355135H

Severity: CLASS - 1

Certification Status: NO COMPLIANCE RECORDED

Penalty Balance Due: \$0.00

Hearing Status: PENDING

**Respondent Information**

Name: DINO SON REALTY CORP

Mailing Address: 156 WILLIAMS AT 10TH FL , NY , NY 10038

**Violation Details**

Violation Date: 08/29/2018

Violation Type: CONSTRUCTION

Served Date: 08/29/2018

Inspection Unit: EMERGENCY RESPONSE TEAM (ERT)

Infraction Codes	Section of Law	Standard Description
127	27-369,BC 1020.2	FAIL TO PROVIDE UNOBSTRUCTED EXIT PASSAGEWAY

**Specific Violation Condition(s) and Remedy:**

FAILURE TO PROVIDE UNOBSTRUCTED EXIT PASSAGEWAY.NTOED:PREMISES 20 STORY MASONRY COMMERCIAL BUILDING.AT THE TIME OF INSPECTION I OBSERVED EMERGENCY EXIT FROM BELGIAN CAFE KITCHEN TO STREET LEVEL THROUGH UNDER CO

Issuing Inspector ID: 2748

DOB Violation Number: 10182018CCER01

Issued as Aggravated Level: NO

**Dept. of Buildings Compliance History and Events**

Certification Status: NO COMPLIANCE RECORDED

Compliance On:

A Certificate of Correction must be submitted to the Administrative Enforcement Unit (AEU) for all violations. A violation that is not dismissed by ECB will continue to remain ACTIVE or "open" on DOB records until acceptable proof is submitted to the AEU, even if you have paid the penalty imposed by ECB.

**ECB Hearing Information**

Scheduled Hearing Date/Time: 10/18/2018 8:30

Hearing Status: PENDING

**ECB Penalty Information**

Penalty Imposed: \$0.00

Adjustments: \$0.00

Amount Paid: \$0.00

Penalty Balance Due: \$0.00

If you have any questions please review these [Frequently Asked Questions](#), the [Glossary](#), or call the 311 Citizen Service Center by dialing 311 or (212) NEW YORK outside of New York City.

## AFFIDAVIT OF SERVICE

STATE OF NEW YORK }  
COUNTY OF NEW YORK } S.S.

I, Raven Kerr, being duly sworn, deposes and says:

I am not a party to this action, am over 18 years of age and reside in the Brooklyn, New York.

On October 26, 2018, I served the within ***SUPPLEMENTAL NOTICE OF DEFAULT*** upon:

Scorpion Fitness, Inc.  
220 Fifth Avenue,  
New York, New York 10001

Scorpion Fitness, Inc.  
88 Lexington Ave., Ste. 9D  
New York, New York 10016

Scorpion Club Ventures LLC  
220 Fifth Avenue,  
New York, New York 10001

Scorpion Club Ventures LLC  
88 Lexington Ave., Ste. 9D  
New York, New York 10016

John Shams  
220 Fifth Avenue  
New York, New York 10001

John Shams  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016

Scorpion Fitness, Inc.  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016

John Shams  
88 Lexington Ave., Ste. 41E  
New York, New York 10016

Scorpion Club Ventures LLC  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016

Massimo F. D'Angelo  
ADAM LEITMAN BAILEY, P.C.  
One Battery Park Plaza, Eighteenth Floor  
New York, New York 10004

by mailing the same first class with certificates of mailing in sealed envelopes, with postage prepaid thereon, in a post-office or official depository of the U.S. Postal Service within the State of New York, addressed to the addressees as indicated above and by overnight mail service (with Express Mail codes EF139728075US, EF139728089US, EF139728092US, EF139728101US, EF139728035US, EF139728614US, EF139728605US, EF139728628US, EF139728591US, EF139728588US) by placing the same in a postpaid, properly addressed and sealed envelopes and delivering said envelopes to a postal employee at a United States Post Office in the Borough of Manhattan, City and State of New York for processing under the exclusive care and custody of the United States Postal Service, Church Street Station Branch, within the City, County and State of New York.

Sworn to before me this  
29 day of October, 2018

~~Raven Kerr~~

ANDRENEE BOOTHE  
Notary Public, State of New York  
No. 01BO6112402  
Qualified in Kings County  
Commission Expires 07/06/2020

**UNITED STATES POSTAL SERVICE**  
Certificate of Mailing  
This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing. This form may be used for domestic and international mail.  
From: **Kossoff, PLLC**  
**217 Broadway – Suite 401**  
**New York, NY 10007**  
To: **Scorpion Club Ventures, LLC**  
**220 Fifth Avenue**  
**New York, New York 10001**  
PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES POSTAL SERVICE**  
Certificate of Mailing  
This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing. This form may be used for domestic and international mail.  
From: **Kossoff, PLLC**  
**217 Broadway – Suite 401**  
**New York, NY 10007**  
To: **Scorpion fitness, Inc.**  
**220 Fifth Avenue**  
**New York, New York 10001**  
PS Form 3817, April 2007 PSN 7530-02-000-9065

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From: **Kossoff, PLLC**  
**217 Broadway – Suite 401**  
**New York, NY 10007**  
To: **Scorpion Fitness, Inc.**  
**325 Fifth Avenue Ste. 401**  
**New York, New York 10001**  
PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES POSTAL SERVICE**  
Certificate of Mailing  
This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing. This form may be used for domestic and international mail.  
From: **Kossoff, PLLC**  
**217 Broadway – Suite 401**  
**New York, NY 10007**  
To: **John Shams**  
**220 Fifth Avenue**  
**New York, New York 10001**  
PS Form 3817, April 2007 PSN 7530-02-000-9065



**UNITED STATES POSTAL SERVICE**  
To pay fee, affix stamps or postage meter mark here  
\$1.40 0  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

**Certificate of Mailing**  
This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing. This form may be used for domestic and international mail.  
From: Kossoff, PLLC  
217 Broadway - Suite 401  
New York, NY 10007

To: Scorpion Fitness, Inc.  
88 Lexington Ave., Ste. 901  
New York, New York 10017

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES POSTAL SERVICE**  
To pay fee, affix stamps or postage meter mark here  
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FIRST-CLASS  
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10007

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217 Broadway - Suite 401  
New York, NY 10007

To: John Shams  
325 Fifth Avenue, Ste. 401  
New York, New York 10017

PS Form 3817, April 2007 PSN 7530-02-000-9065

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US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

**Certificate of Mailing**  
This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing. This form may be used for domestic and international mail.  
From: Kossoff, PLLC  
217 Broadway - Suite 401  
New York, NY 10007

To: Scorpion Club Ventures LLC  
325 Fifth Avenue, Ste. 401  
New York, New York 10017

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES POSTAL SERVICE**  
To pay fee, affix stamps or postage meter mark here  
\$1.40 0  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

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From: Kossoff, PLLC  
217 Broadway - Suite 401  
New York, NY 10007

To: Scorpion Club Ventures LLC  
88 Lexington Ave., Ste. 901  
New York, New York 10017

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES POSTAL SERVICE** **Certificate of Mailing**  
To pay fee, affix stamps or meter postage here.  
This Certificate of Mailing provides evidence that mail has been presented to USPS.  
This form may be used for domestic and international mail.  
From:

**\$1.40**  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

**Kossoff, PLLC**  
217 Broadway - Suite 401  
New York, NY 10007

To: **Massimo F. D'Angelo**  
**Adam Leitman Bailey, P.C.**  
**One Battery Park Plaza, Eleventh Floor**  
**New York, New York 10007**

PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES POSTAL SERVICE** **Certificate of Mailing**  
To pay fee, affix stamps or meter postage here.  
This Certificate of Mailing provides evidence that mail has been presented to USPS.  
This form may be used for domestic and international mail.  
From:

**\$1.40**  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

**Kossoff, PLLC**  
217 Broadway - Suite 401  
New York, NY 10007

To: **John Shams**  
**88 Lexington Ave, Ste 9D**  
**New York, New York 10007**

PS Form 3817, April 2007 PSN 7530-02-000-9065

**CUSTOMER USE ONLY**

FROM: (PLEASE PRINT) KOS8OFF, PLLC  
217 BROADWAY, SUITE # 401  
NEW YORK, NY 10007-2944

PHONE: ( )

*220 Fifth Avenue (Asin)*

**PAYMENT BY ACCOUNT (if applicable)**  
USPS® Corporate Acct. No. 092004  
Federal Agency Acct. No. or Postal Service™ Acct. No.

**DELIVERY OPTIONS (Customer Use Only)**  
☐ **SIGNATURE REQUIRED** (Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.)  
**Delivery Options:**  
☐ No Saturday Delivery (delivered next business day)  
☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
\*Refer to USPS.com or local Post Office for availability.

**TO: (PLEASE PRINT)** Scorpion Fitness, Inc.  
220 Fifth Avenue  
New York, New York 10001

PHONE: ( )

ZIP + 4® (U.S. ADDRESSES ONLY)  
10001



**ORIGIN (POSTAL SERVICE USE ONLY)**  
☐ 1-Day ☐ 2-Day ☐ Military ☐ DPO

PO ZIP Code: Scheduled Delivery Date (MM/DD/YY):  
Date Accepted (MM/DD/YY): Scheduled Delivery Time:  
Time Accepted: 10:30 AM Delivery Fee: Insurance Fee: COD Fee:  
Weight: Flat Rate: Sunday/Holiday Premium Fee: Return Receipt Fee: Live Animal Transportation Fee:  
Acceptance Employee Initials: Total Postage & Fees:

**DELIVERY (POSTAL SERVICE USE ONLY)**  
Delivery Attempt (MM/DD/YY): Time: Employee Signature:  
Delivery Attempt (MM/DD/YY): Time: Employee Signature:

LABEL 11-K, SEPTEMBER 2015 PSN 7500-02-000-9998 2-CUSTOMER COPY

For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
\$100.00 Insurance included.  
*Supplemental default notice*

**CUSTOMER USE ONLY**

FROM: (PLEASE PRINT) KOS8OFF, PLLC  
217 BROADWAY, SUITE # 401  
NEW YORK, NY 10007-2944

PHONE: ( )

*220 Fifth Avenue (Asin)*

**PAYMENT BY ACCOUNT (if applicable)**  
USPS® Corporate Acct. No. 092004  
Federal Agency Acct. No. or Postal Service™ Acct. No.

**DELIVERY OPTIONS (Customer Use Only)**  
☐ **SIGNATURE REQUIRED** (Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.)  
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☐ 10:30 AM Delivery Required (additional fee, where available)  
\*Refer to USPS.com or local Post Office for availability.

**TO: (PLEASE PRINT)** Scorpion Club Ventures LLC  
220 Fifth Avenue  
New York, New York 10001

PHONE: ( )

ZIP + 4® (U.S. ADDRESSES ONLY)  
10001

**ORIGIN (POSTAL SERVICE USE ONLY)**  
☐ 1-Day ☐ 2-Day ☐ Military ☐ DPO

PO ZIP Code: Scheduled Delivery Date (MM/DD/YY):  
Date Accepted (MM/DD/YY): Scheduled Delivery Time:  
Time Accepted: 10:30 AM Delivery Fee: Insurance Fee: COD Fee:  
Weight: Flat Rate: Sunday/Holiday Premium Fee: Return Receipt Fee: Live Animal Transportation Fee:  
Acceptance Employee Initials: Total Postage & Fees:

**DELIVERY (POSTAL SERVICE USE ONLY)**  
Delivery Attempt (MM/DD/YY): Time: Employee Signature:  
Delivery Attempt (MM/DD/YY): Time: Employee Signature:

LABEL 11-K, SEPTEMBER 2015 PSN 7500-02-000-9998 2-CUSTOMER COPY

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\$100.00 Insurance included.  
*Supplemental default notice*

**CUSTOMER USE ONLY**  
 FROM: (PLEASE PRINT) PHONE ( )  
 K088OFF, PLLC  
 217 BROADWAY, SUITE # 401  
 NEW YORK, NY 10007-2944

220 Fifth Avenue (Asm)

**PAYMENT BY ACCOUNT (if applicable)**  
 USPS® Corporate Acct. No. 092004 Federal Agency Acct. No. or Postal Service® Acct. No.

**DELIVERY OPTIONS (Customer Use Only)**  
☐ **SIGNATURE REQUIRED** (Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.)  
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 \*Refer to USPS.com® or local Post Office® for availability.

**TO: (PLEASE PRINT)** PHONE ( )  
 John Shams  
 220 Fifth Avenue  
 New York, New York 10001

ZIP + 4® (U.S. ADDRESSES ONLY)  
 1 0 0 0 1

**UNITED STATES POSTAL SERVICE®**  
 EF 139728628 US

**PRIORITY MAIL EXPRESS™**

**ORIGIN (POSTAL SERVICE USE ONLY)**  
☐ 1-Day ☐ 2-Day ☐ Military ☐ DPO

**DELIVERY (POSTAL SERVICE USE ONLY)**  
 PO ZIP Code Scheduled Delivery Date (MM/DD/YY) Postage \$  
 Date Accepted (MM/DD/YY) Scheduled Delivery Time 10:30 AM 3:00 PM 12 NOON Insurance Fee COD Fee \$ \$  
 Time Accepted 10:30 AM Delivery Fee \$ Return Receipt Fee Live Animal Transportation Fee \$  
 Weight \$ Flat Rate Sunday/Holiday Premium Fee Total Postage & Fees \$  
 Acceptance Employee Initials \$

**DELIVERY (POSTAL SERVICE USE ONLY)**  
 Delivery Attempt (MM/DD/YY) Time AM PM Employee Signature  
 Delivery Attempt (MM/DD/YY) Time AM PM Employee Signature

LABEL 11-F, SEPTEMBER 2015 PSN 7699-02-000-9998 2-CUSTOMER COP

■ For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
 ■ \$100.00 Insurance included.  
 Supplemental default notice

**CUSTOMER USE ONLY**  
 FROM: (PLEASE PRINT) PHONE ( )  
 K088OFF, PLLC  
 217 BROADWAY, SUITE # 401  
 NEW YORK, NY 10007-2944

220 Fifth Avenue (Asm)

**PAYMENT BY ACCOUNT (if applicable)**  
 USPS® Corporate Acct. No. 092004 Federal Agency Acct. No. or Postal Service® Acct. No.

**DELIVERY OPTIONS (Customer Use Only)**  
☐ **SIGNATURE REQUIRED** (Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.)  
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☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
 \*Refer to USPS.com® or local Post Office® for availability.

**TO: (PLEASE PRINT)** PHONE ( )  
 Scorpion Fitness, Inc.  
 325 Fifth Avenue, Ste 41E  
 New York, New York 10016

ZIP + 4® (U.S. ADDRESSES ONLY)  
 1 0 0 1 6

**UNITED STATES POSTAL SERVICE®**  
 EF 139728605 US

**PRIORITY MAIL EXPRESS™**

**ORIGIN (POSTAL SERVICE USE ONLY)**  
☐ 1-Day ☐ 2-Day ☐ Military ☐ DPO

**DELIVERY (POSTAL SERVICE USE ONLY)**  
 PO ZIP Code Scheduled Delivery Date (MM/DD/YY) Postage \$  
 Date Accepted (MM/DD/YY) Scheduled Delivery Time 10:30 AM 3:00 PM 12 NOON Insurance Fee COD Fee \$ \$  
 Time Accepted 10:30 AM Delivery Fee \$ Return Receipt Fee Live Animal Transportation Fee \$  
 Weight \$ Flat Rate Sunday/Holiday Premium Fee Total Postage & Fees \$  
 Acceptance Employee Initials \$

**DELIVERY (POSTAL SERVICE USE ONLY)**  
 Delivery Attempt (MM/DD/YY) Time AM PM Employee Signature  
 Delivery Attempt (MM/DD/YY) Time AM PM Employee Signature

LABEL 11-F, SEPTEMBER 2015 PSN 7699-02-000-9998 2-CUSTOMER COP

■ For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
 ■ \$100.00 Insurance included.  
 Supplemental default notice



**CUSTOMER USE ONLY**  
 FROM: (PLEASE PRINT) PHONE ( )  
 K0880FF, PLLC  
 217 BROADWAY, SUITE # 401  
 NEW YORK, NY 10007-2944  
 220 Fifth Avenue (Apt)  
**PAYMENT BY ACCOUNT (if applicable)**  
 USPS Corporate Acct. No. 092004 Federal Agency Acct. No. or Postal Service Acct. No.  
**DELIVERY OPTIONS (Customer Use Only)**  
☐ **SIGNATURE REQUIRED** Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.  
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☐ 10:30 AM Delivery Required (additional fee, where available)  
 \*Refer to USPS.com or local Post Office for availability.  
**TO: (PLEASE PRINT)** PHONE ( )  
 Scorpion Club Ventures LLC  
 325 Fifth Avenue, Ste. 41E  
 New York, New York 10016  
 ZIP + 4® (U.S. ADDRESSES ONLY)  
 1 0 0 1 6 -

**UNITED STATES POSTAL SERVICE®**  
 EF 139728614 US  
**PRIORITY MAIL EXPRESS™**  
**ORIGIN (POSTAL SERVICE USE ONLY)**  
☐ 1-Day ☐ 2-Day ☐ Military ☐ DPO  
 PO ZIP Code Scheduled Delivery Date (MM/DD/YY) Postage \$  
 Date Accepted (MM/DD/YY) Scheduled Delivery Time ☐ 10:30 AM ☐ 3:00 PM ☐ 12 NOON Insurance Fee \$ COD Fee \$  
 Time Accepted ☐ AM ☐ PM 10:30 AM Delivery Fee \$ Return Receipt Fee \$ Live Animal Transportation Fee \$  
 Weight ☐ Flat Rate ☐ Sunday/Holiday Premium Fee \$ Total Postage & Fees \$  
 Acceptance Employee Initials \$  
**DELIVERY (POSTAL SERVICE USE ONLY)**  
 Delivery Attempt (MM/DD/YY) Time ☐ AM ☐ PM Employee Signature  
 Delivery Attempt (MM/DD/YY) Time ☐ AM ☐ PM Employee Signature  
 LABEL 11-F, SEPTEMBER 2015 PSN 7600-02-000-9999 2-CUSTOMER COPY

For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
 \$100.00 Insurance included.  
 Supplemental default notice.

**CUSTOMER USE ONLY**  
 FROM: (PLEASE PRINT) PHONE ( )  
 K0880FF, PLLC  
 217 BROADWAY, SUITE # 401  
 NEW YORK, NY 10007-2944  
 220 Fifth Avenue (Apt)  
**PAYMENT BY ACCOUNT (if applicable)**  
 USPS Corporate Acct. No. 092004 Federal Agency Acct. No. or Postal Service Acct. No.  
**DELIVERY OPTIONS (Customer Use Only)**  
☐ **SIGNATURE REQUIRED** Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.  
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☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
 \*Refer to USPS.com or local Post Office for availability.  
**TO: (PLEASE PRINT)** PHONE ( )  
 Scorpion Fitness, Inc.  
 88 Lexington Ave., Ste 9D  
 New York, New York 10016  
 ZIP + 4® (U.S. ADDRESSES ONLY)  
 1 0 0 1 6 -

**UNITED STATES POSTAL SERVICE®**  
 EF 139728035 US  
**PRIORITY MAIL EXPRESS™**  
**ORIGIN (POSTAL SERVICE USE ONLY)**  
☐ 1-Day ☐ 2-Day ☐ Military ☐ DPO  
 PO ZIP Code Scheduled Delivery Date (MM/DD/YY) Postage \$  
 Date Accepted (MM/DD/YY) Scheduled Delivery Time ☐ 10:30 AM ☐ 3:00 PM ☐ 12 NOON Insurance Fee \$ COD Fee \$  
 Time Accepted ☐ AM ☐ PM 10:30 AM Delivery Fee \$ Return Receipt Fee \$ Live Animal Transportation Fee \$  
 Weight ☐ Flat Rate ☐ Sunday/Holiday Premium Fee \$ Total Postage & Fees \$  
 Acceptance Employee Initials \$  
**DELIVERY (POSTAL SERVICE USE ONLY)**  
 Delivery Attempt (MM/DD/YY) Time ☐ AM ☐ PM Employee Signature  
 Delivery Attempt (MM/DD/YY) Time ☐ AM ☐ PM Employee Signature  
 LABEL 11-F, SEPTEMBER 2015 PSN 7600-02-000-9999 2-CUSTOMER COPY

For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
 \$100.00 Insurance included.  
 Supplemental default notice.

**CUSTOMER USE ONLY**  
 FROM: (PLEASE PRINT) PHONE ( )  
 K088OFF, PLLC  
 217 BROADWAY, SUITE # 401  
 NEW YORK, NY 10007-2944  
 220 Fifth Avenue (15m)  
**PAYMENT BY ACCOUNT (if applicable)**  
 USPS® Corporate Acct. No. 092004 Federal Agency Acct. No. or Postal Service™ Acct. No.  
**DELIVERY OPTIONS (Customer Use Only)**  
☐ **SIGNATURE REQUIRED** Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.  
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☐ 10:30 AM Delivery Required (additional fee, where available)  
 \*Refer to USPS.com or local Post Office for availability.  
**TO: (PLEASE PRINT)** PHONE ( )  
 Scorpion Club Ventures LLC  
 88 Lexington Ave., Ste. 9D  
 New York, New York 10016  
 ZIP + 4® (U.S. ADDRESSES ONLY)  
 10016

**UNITED STATES POSTAL SERVICE®**  
 EF 139728101 US  
**PRIORITY MAIL EXPRESS™**  
**ORIGIN (POSTAL SERVICE USE ONLY)**  
☐ 1-Day ☐ 2-Day ☐ Military ☐ DPO  
 PO ZIP Code Scheduled Delivery Date (MM/DD/YYYY)  
 Date Accepted (MM/DD/YYYY) Scheduled Delivery Time  
☐ 10:30 AM ☐ 3:00 PM ☐ 12 NOON  
 Time Accepted 10:30 AM Delivery Fee  
☐ AM ☐ PM \$  
 Weight ☐ Flat Rate ☐ Sunday/Holiday Premium Fee  
 Acceptance Employee Initials  
**DELIVERY (POSTAL SERVICE USE ONLY)**  
 Delivery Attempt (MM/DD/YYYY) Time ☐ AM ☐ PM Employee Signature  
 Delivery Attempt (MM/DD/YYYY) Time ☐ AM ☐ PM Employee Signature  
 LABEL 11-F, SEPTEMBER 2015 PSN 7000-02-000-9998 2-CUSTOMER COPY

**CUSTOMER USE ONLY**  
 FROM: (PLEASE PRINT) PHONE ( )  
 K088OFF, PLLC  
 217 BROADWAY, SUITE # 401  
 NEW YORK, NY 10007-2944  
 220 Fifth Avenue (15m)  
**PAYMENT BY ACCOUNT (if applicable)**  
 USPS® Corporate Acct. No. 092004 Federal Agency Acct. No. or Postal Service™ Acct. No.  
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 \*Refer to USPS.com or local Post Office for availability.  
**TO: (PLEASE PRINT)** PHONE ( )  
 John Shams  
 325 Fifth Avenue, Ste. 41E  
 New York, New York 10016  
 ZIP + 4® (U.S. ADDRESSES ONLY)  
 10016  
 For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
 \$100.00 Insurance included.  
 Supplemental default notice

**UNITED STATES POSTAL SERVICE®**  
 EF 139728092 US  
**PRIORITY MAIL EXPRESS™**  
**ORIGIN (POSTAL SERVICE USE ONLY)**  
☐ 1-Day NEW ☐ 2-Day ☐ Military ☐ DPO  
 PO ZIP Code Scheduled Delivery Date (MM/DD/YYYY)  
 Date Accepted (MM/DD/YYYY) Scheduled Delivery Time  
☐ 10:30 AM ☐ 3:00 PM ☐ 12 NOON  
 Time Accepted 10:30 AM Delivery Fee  
☐ AM ☐ PM \$  
 Weight ☐ Flat Rate ☐ Sunday/Holiday Premium Fee  
 Acceptance Employee Initials  
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 Delivery Attempt (MM/DD/YYYY) Time ☐ AM ☐ PM Employee Signature  
 Delivery Attempt (MM/DD/YYYY) Time ☐ AM ☐ PM Employee Signature  
 LABEL 11-F, SEPTEMBER 2015 PSN 7000-02-000-9998 2-CUSTOMER COPY

<b>CUSTOMER USE ONLY</b>		FROM: (PLEASE PRINT) <b>K089OFF, PLLC</b> 217 BROADWAY, SUITE # 401 NEW YORK, NY 10007-2944		PHONE ( )	EF 139728089 US
220 Fifth Avenue (ASIM)		UNITED STATES POSTAL SERVICE		PRIORITY MAIL EXPRESS™	
<b>PAYMENT BY ACCOUNT (If applicable)</b>		USPS® Corporate Acct. No. <b>092004</b>			
<b>DELIVERY OPTIONS (Customer Use Only)</b>		<b>ORIGIN (POSTAL SERVICE USE ONLY)</b>			
<input type="checkbox"/> <b>SIGNATURE REQUIRED</b> Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery. <b>Delivery Options</b> <input type="checkbox"/> No Saturday Delivery (delivered next business day) <input type="checkbox"/> Sunday/Holiday Delivery Required (additional fee, where available) <input type="checkbox"/> 10:30 AM Delivery Required (additional fee, where available) *Refer to USPS.com® or local Post Office® for availability.		<input type="checkbox"/> 1-Day <input type="checkbox"/> 2-Day <input type="checkbox"/> Military <input type="checkbox"/> DFO PO ZIP Code <b>10011</b> Scheduled Delivery Date (MMDDYY) <b>062618</b> Date Accepted (MMDDYY) <b>062618</b> Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input type="checkbox"/> 12 NOON Time Accepted <input type="checkbox"/> AM <input type="checkbox"/> PM <b>10:30 AM Delivery Fee</b> Weight <input type="checkbox"/> Flat Rate <input type="checkbox"/> Sunday/Holiday Premium Fee Acceptance Employee Initials			
<b>TO: (PLEASE PRINT)</b> <b>John Shams</b> <b>88 Lexington Ave., Ste. 9D</b> <b>New York, New York 10016</b> ZIP + 4® (U.S. ADDRESSES ONLY) <b>10016</b>		<b>DELIVERY (POSTAL SERVICE USE ONLY)</b> Delivery Attempt (MMDDYY) <b>062618</b> Time <input type="checkbox"/> AM <input type="checkbox"/> PM Employee Signature Delivery Attempt (MMDDYY) <b>062618</b> Time <input type="checkbox"/> AM <input type="checkbox"/> PM Employee Signature LABEL 11-F, SEPTEMBER 2015 PSN 7690-02-000-0000 2-CUSTOMER COPY			

<b>CUSTOMER USE ONLY</b>		FROM: (PLEASE PRINT) <b>K089OFF, PLLC</b> 217 BROADWAY, SUITE # 401 NEW YORK, NY 10007-2944		PHONE ( )	EF 139728075 US
220 Fifth Avenue (ASIM)		UNITED STATES POSTAL SERVICE		PRIORITY MAIL EXPRESS™	
<b>PAYMENT BY ACCOUNT (If applicable)</b>		USPS® Corporate Acct. No. <b>092004</b>			
<b>DELIVERY OPTIONS (Customer Use Only)</b>		<b>ORIGIN (POSTAL SERVICE USE ONLY)</b>			
<input type="checkbox"/> <b>SIGNATURE REQUIRED</b> Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery. <b>Delivery Options</b> <input type="checkbox"/> No Saturday Delivery (delivered next business day) <input type="checkbox"/> Sunday/Holiday Delivery Required (additional fee, where available) <input type="checkbox"/> 10:30 AM Delivery Required (additional fee, where available) *Refer to USPS.com® or local Post Office® for availability.		<input type="checkbox"/> 1-Day <input type="checkbox"/> 2-Day <input type="checkbox"/> Military <input type="checkbox"/> DFO PO ZIP Code <b>10011</b> Scheduled Delivery Date (MMDDYY) <b>062618</b> Date Accepted (MMDDYY) <b>062618</b> Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input type="checkbox"/> 12 NOON Time Accepted <input type="checkbox"/> AM <input type="checkbox"/> PM <b>10:30 AM Delivery Fee</b> Weight <input type="checkbox"/> Flat Rate <input type="checkbox"/> Sunday/Holiday Premium Fee Acceptance Employee Initials			
<b>TO: (PLEASE PRINT)</b> <b>Massimo F. D'Angelo</b> <b>Adam Leithman Bailey, P.C.</b> <b>One Battery Park Plaza, Eighteenth Floor</b> <b>New York, New York 10004</b> ZIP + 4® (U.S. ADDRESSES ONLY) <b>10004</b>		<b>DELIVERY (POSTAL SERVICE USE ONLY)</b> Delivery Attempt (MMDDYY) <b>062618</b> Time <input type="checkbox"/> AM <input type="checkbox"/> PM Employee Signature Delivery Attempt (MMDDYY) <b>062618</b> Time <input type="checkbox"/> AM <input type="checkbox"/> PM Employee Signature LABEL 11-F, SEPTEMBER 2015 PSN 7690-02-000-0000 2-CUSTOMER COPY			

**AFFIDAVIT OF SERVICE**

STATE OF NEW YORK     }  
                                      } s.s.  
COUNTY OF NEW YORK   }

I, Ashti Mohabir, being duly sworn, deposes and says:

I am not a party to this action, am over 18 years of age and reside in the Queens, New York.

On April 23, 2019, I served the within ***Five (5) Day Termination/Cancellation Notice*** upon:

Scorpion Fitness, Inc.  
220 Fifth Avenue,  
New York, New York 10001

Scorpion Fitness, Inc.  
88 Lexington Ave., Ste. 9D  
New York, New York 10016

Scorpion Club Ventures LLC  
220 Fifth Avenue,  
New York, New York 10001

Scorpion Club Ventures LLC  
88 Lexington Ave., Ste. 9D  
New York, New York 10016

John Shams  
220 Fifth Avenue,  
New York, New York 10001

John Shams  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016

Scorpion Fitness, Inc.  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016

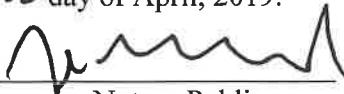
John Shams  
88 Lexington Ave., Ste. 9D  
New York, New York 10016

Scorpion Club Ventures LLC  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016

by mailing the same first class with certificates of mailing in sealed envelopes, with postage prepaid thereon, in a post-office or official depository of the U.S. Postal Service within the State of New York, addressed to the addressees as indicated above and by overnight mail service (with Express Mail codes EF204207227US, EF204207213US, EF204207200US, EF204207195US, EF204207187US, EF204207173US, EF204207160US, EF204207156US, EF139726162US, respectively ) by placing the same in a postpaid, properly addressed and sealed envelopes and delivering said envelopes to a postal employee at a United States Post Office in the Borough of Manhattan, City and State of New York for processing under the exclusive care and custody of the United States Postal Service, Church Street Station Branch, within the City, County and State of New York.

  
Ashti Mohabir

Sworn to before me this  
23<sup>rd</sup> day of April, 2019.

  
Notary Public



CUSTOMER USE ONLY			
FROM: (PLEASE PRINT) <b>KOSSOFF, PLLC</b> <b>217 BROADWAY, SUITE # 401</b> <b>NEW YORK, NY 10007-2944</b>	PHONE ( ) <b>212 691 1100</b>		
220th Ave. S. 10001 (ASM)			
CHURCH STREET STATION APR 23 2019			
UNITED STATES POSTAL SERVICE®			
PRIORITY MAIL EXPRESS™			
PAYMENT BY ACCOUNT (if applicable) USPS® Corporate Acct. No. <b>092004</b> Federal Agency Acct. No. or Postal Service® Acct. No.			
DELIVERY OPTIONS (Customer Use Only) <input checked="" type="checkbox"/> SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery. Delivery Options <input type="checkbox"/> No Saturday Delivery (delivered next business day) <input type="checkbox"/> Sunday/Holiday Delivery Required (additional fee, where available*) <input type="checkbox"/> 10:30 AM Delivery Required (additional fee, where available*) *Refer to USPS.com® or local Post Office® for availability.			
ORIGIN (POSTAL SERVICE USE ONLY) <input type="checkbox"/> 1-Day <input type="checkbox"/> 2-Day <input type="checkbox"/> Military <input type="checkbox"/> DFO			
PO ZIP Code <b>10007</b>	Scheduled Delivery Date (MM/DD/YY) <b>4/24/19</b>	Postage <b>\$25.50</b>	
Date Accepted (MM/DD/YY) <b>4/23/19</b>	Scheduled Delivery Time <input checked="" type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input type="checkbox"/> 12 NOON	Insurance Fee <b>\$</b>	COD Fee <b>\$</b>
Time Accepted <b>10:24</b> <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	10:30 AM Delivery Fee <b>\$</b>	Return Receipt Fee <b>\$2.50</b>	Live Animal Transportation Fee <b>\$</b>
Weight <b>1 lb. 1 oz.</b>	<input checked="" type="checkbox"/> Flat Rate	Sunday/Holiday Premium Fee <b>\$</b>	Total Postage & Fees <b>\$28.30</b>
Acceptance Employee Initials <b>MS</b>			
DELIVERY (POSTAL SERVICE USE ONLY)			
Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	
Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	
LABEL 11-F, SEPTEMBER 2015 PSN 7690-02-000-9999 2-CUSTOMER COPY			

termination notice Pg 98 of 108

<b>CUSTOMER USE ONLY</b>		<b>FROM: (PLEASE PRINT)</b>		<b>PHONE ( )</b>	
		212 267 6364			
KDSOFF, PLLC		217 BROADWAY RM 401		NEW YORK, NY 10007-2944	
<b>PAYMENT BY ACCOUNT (if applicable)</b>		USPS® Corporate Acct. No.		Federal Agency Acct. No. or Postal Service® Acct. No.	
092004					
<b>DELIVERY OPTIONS (Customer Use Only)</b>		<b>ORIGIN (POSTAL SERVICE USE ONLY)</b>			
<input type="checkbox"/> <b>SIGNATURE REQUIRED</b> Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.		<input type="checkbox"/> 1-Day <input type="checkbox"/> 2-Day <input type="checkbox"/> Military <input type="checkbox"/> DFO			
<b>Delivery Options</b>		<b>PO ZIP Code</b> 10007 <b>Scheduled Delivery Date (MM/DD/YY)</b> 4/24/19 <b>Postage</b> \$ 25.50			
<input type="checkbox"/> No Saturday Delivery (delivered next business day) <input type="checkbox"/> Sunday/Holiday Delivery Required (additional fee, where available) <input type="checkbox"/> 10:30 AM Delivery Required (additional fee, where available) *Refer to USPS.com® or local Post Office® for availability.		<b>Date Accepted (MM/DD/YY)</b> 4/23/19 <b>Scheduled Delivery Time</b> <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input checked="" type="checkbox"/> 12 NOON <b>Insurance Fee</b> \$ <b>COD Fee</b> \$			
<b>TO: (PLEASE PRINT)</b>		<b>Time Accepted</b> 10:29 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM <b>10:30 AM Delivery Fee</b> \$ <b>Return Receipt Fee</b> \$ 2.80 <b>Live Animal Transportation Fee</b> \$			
John Shams 325 5th Avenue, Ste. 41E New York, New York 10016		<b>Weight</b> <input type="checkbox"/> Flat Rate <input checked="" type="checkbox"/> <b>Sunday/Holiday Premium Fee</b> \$ <b>Total Postage &amp; Fees</b> \$ 28.30 lbs. 1.2 ozs. <b>Acceptance Employee Initials</b> MS			
<b>ZIP + 4® (U.S. ADDRESSES ONLY)</b>		<b>DELIVERY (POSTAL SERVICE USE ONLY)</b>			
10016		<b>Delivery Attempt (MM/DD/YY)</b> <b>Time</b> <input type="checkbox"/> AM <input type="checkbox"/> PM <b>Employee Signature</b>			
		<b>Delivery Attempt (MM/DD/YY)</b> <b>Time</b> <input type="checkbox"/> AM <input type="checkbox"/> PM <b>Employee Signature</b>			
■ For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811. ■ \$100.00 insurance included.		LABEL 11-F, SEPTEMBER 2015 PSN 7690-02-000-9998 <b>2-CUSTOMER COPY</b>			

**CUSTOMER USE ONLY**  
FROM: (PLEASE PRINT) PHONE: ( ) 212 267 6364  
KQSB0FF, PLLC  
217 BROADWAY RM 401  
NEW YORK, NY 10007-2944



EF 204207160 US



UNITED STATES  
POSTAL SERVICE®

**PRIORITY  
★ MAIL ★  
EXPRESS™**

**PAYMENT BY ACCOUNT (if applicable)**

USPS® Corporate Acct. No. Federal Agency Acct. No. or Postal Service® Acct. No.

092004

**DELIVERY OPTIONS (Customer Use Only)**

☐ **SIGNATURE REQUIRED** Note: The mailer must check the "Signature Required" box if the mailer: (1) Requires the addressee's signature; OR (2) Purchases additional insurance; OR (3) Purchases COD service; OR (4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.

**Delivery Options**

- ☐ No Saturday Delivery (delivered next business day)  
☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
\*Refer to USPS.com® or local Post Office® for availability.

**TO: (PLEASE PRINT)**

PHONE: ( )

Scorpion Club Venture LLC  
88 Lexington Ave., Ste. 9D  
New York, New York 10016

**ZIP + 4® (U.S. ADDRESSES ONLY)**

1 0 0 1 6

- For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
■ \$100.00 Insurance included.

**OFFICIAL (POSTAL SERVICE USE ONLY)**

<input checked="" type="checkbox"/> 1-Day	<input type="checkbox"/> 2-Day	<input type="checkbox"/> Military	<input type="checkbox"/> DPO
PO ZIP Code 10007	Scheduled Delivery Date (MM/DD/YY) 4/24/19	Postage \$ 25.50	
Date Accepted (MM/DD/YY) 4/23/19	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input checked="" type="checkbox"/> 12 NOON	Insurance Fee \$	COD Fee \$
Time Accepted 10:30	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	10:30 AM Delivery Fee \$	Return Receipt Fee \$
Weight 1 lbs. 13 ozs.	<input type="checkbox"/> Flat Rate	Sunday/Holiday Premium Fee \$	Live Animal Transportation Fee \$
	Acceptance Employee Initials MS	Total Postage & Fees \$ 28.50	

**DELIVERY (POSTAL SERVICE USE ONLY)**

Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature

LABEL 11-F, SEPTEMBER 2015

PSN 7690-02-000-9999

2-CUSTOMER COPY

**PRIMER USE ONLY**  
1. (PLEASE PRINT)  
FROM: OFFICE, PLLC  
17 BROADWAY RM 401  
NEW YORK, NY 10007-2944  
PHONE ( ) 212-267-6364  
EFFECT DATE 204207173 US  
NEW YORK NY 10007  
APR 23 2019  
UNITED STATES POSTAL SERVICE®  
PRIORITY MAIL EXPRESS™  
BY ACCOUNT (if applicable)  
Corporate Acct. No. 72004 Federal Agency Acct. No. or Postal Service™ Acct. No.  
OPTIONAL SERVICES (Customer Use Only)  
SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) Is an addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's care or other secure location without attempting to obtain the addressee's signature on delivery.  
Options:  
Saturday Delivery (delivered next business day)  
Holiday/Holiday Delivery Required (additional fee, where available)  
10 AM Delivery Required (additional fee, where available)  
for to USPS.com or local Post Office for availability.  
SE PRINT  
TO: OPTION Fitness Inc.  
Lexington Ave., Ste. 9D  
New York, New York 10016  
PHONE ( )  
S. ADDRESSES ONLY  
0016 -  
For or USPS Tracking™, visit USPS.com or call 800-222-1811.  
Insurance Included.  
ORIGIN (POSTAL SERVICE USE ONLY)  
☒ 1-Day ☐ 2-Day ☐ Military ☐ DPO  
PO ZIP Code 10007  
Sched. Delivery Date (MM/DD/YY) 4/24/19  
Postage \$ 25.50  
Date Accepted (MM/DD/YY) 4/23/19  
Sched. Delivery Time  
☐ 10:30 AM ☐ 3:00 PM  
☐ NOON  
Insurance Fee \$ COD Fee \$  
Time Accepted 10:33 AM  
10:30 AM Delivery Fee \$ Live Animal Transportation Fee \$  
Weight 13 lbs. ☒ Flat Rate ☐ Sunday/Holiday Premium Fee \$  
Acceptance Employee Initials MS  
Return Receipt Fee \$ 2.00  
Total Postage & Fees \$ 28.50  
DELIVERY (POSTAL SERVICE USE ONLY)  
Delivery Attempt (MM/DD/YY) Time Employee Signature  
☐ AM ☐ PM  
Delivery Attempt (MM/DD/YY) Time Employee Signature  
☐ AM ☐ PM  
LABEL 11-F, SEPTEMBER 2015 PSN 7690-02-000-9998 2-CUSTOMER COPY

FROM: (PLEASE PRINT)

PHONE ( )

212-267-6364

KOSSOFF, PLLC  
217 BROADWAY RM 401  
NEW YORK, NY 10007-2944

termination notice Pg 101 of 108



EF 204207187 US



UNITED STATES  
POSTAL SERVICE®

PRIORITY  
★ MAIL ★  
EXPRESS™

PAYMENT BY ACCOUNT (if applicable)

USPS® Corporate Acct. No.

Federal Agency Acct. No. or Postal Service™ Acct. No.

DELIVERY OPTIONS (Customer Use Only)

☒ SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.

Delivery Options

- ☐ No Saturday Delivery (delivered next business day)
- ☐ Sunday/Holiday Delivery Required (additional fee, where available\*)
- ☐ 10:30 AM Delivery Required (additional fee, where available\*)

\*Refer to USPS.com® or local Post Office™ for availability.

O: (PLEASE PRINT)

PHONE ( )

Scorpion Club Ventures LLC  
325 Fifth Avenue Ste. 41E  
New York, New York 10016

IP + 4® (U.S. ADDRESSES ONLY)

1 0 0 1 6 -

For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
\$100.00 Insurance Included.

ORIGIN (POSTAL SERVICE USE ONLY)

<input type="checkbox"/> 1-Day		<input type="checkbox"/> 2-Day		<input type="checkbox"/> Military		<input type="checkbox"/> DPO	
RQ ZIP Code 10007		Scheduled Delivery Date (MM/DD/YY) 4/24/19		Postage \$ 25.50			
Date Accepted (MM/DD/YY) 4/23/19		Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input type="checkbox"/> 12 NOON		Insurance Fee \$		COD Fee \$	
Time Accepted 10:34		<input type="checkbox"/> AM <input type="checkbox"/> PM		Return Receipt Fee \$ 2.80		Live Animal Transportation Fee \$	
Weight 1.3 lbs.		Sunday/Holiday Premium Fee \$		Total Postage & Fees \$ 28.30			
First Rate		Acceptance Employee Initials MS					

DELIVERY (POSTAL SERVICE USE ONLY)

Delivery Attempt (MM/DD/YY)	Time	Employee Signature
	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt (MM/DD/YY)	Time	Employee Signature
	<input type="checkbox"/> AM <input type="checkbox"/> PM	

LABEL 11-F, SEPTEMBER 2015

PSN 7690-02-000-9998

2-CUSTOMER COPY



CUSTOMER USE ONLY

FROM: (PLEASE PRINT)

PHONE ( )

212-247-1044

KO980FF, PLLC  
217 BROADWAY RM 401  
NEW YORK, NY 10007-2944

EF 204207195 US

UNITED STATES  
POSTAL SERVICE®

PRIORITY  
★ MAIL ★  
EXPRESS™

PAYMENT BY ACCOUNT (if applicable)

USPS® Corporate Acct. No.

Federal Agency Acct. No. or Postal Service™ Acct. No.

## DELIVERY OPTIONS (Customer Use Only)

☐ SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.

## Delivery Options

- ☐ No Saturday Delivery (delivered next business day)  
☐ Sunday/Holiday Delivery Required (additional fee, where available\*)  
☐ 10:30 AM Delivery Required (additional fee, where available\*)  
\*Refer to USPS.com® or local Post Office™ for availability.

TO: (PLEASE PRINT)

PHONE ( )

Scorpion Fitness, Inc.  
325 5th Avenue Ste. 41E  
New York, New York 10016

ZIP + 4® (U.S. ADDRESSES ONLY)

10016

## ORIGIN (POSTAL SERVICE USE ONLY)

<input type="checkbox"/> 1-Day	<input type="checkbox"/> 2-Day	<input type="checkbox"/> Military	<input type="checkbox"/> DPO
PO ZIP Code 10007	Scheduled Delivery Date (MM/DD/YY) 4/24/19	Postage \$ 25.50	
Date Accepted (MM/DD/YY) 4/23/19	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input type="checkbox"/> 12 NOON	Insurance Fee \$	COD Fee \$
Time Accepted 10:36	10:30 AM Delivery Fee \$	Return Receipt Fee \$ 80	Live Animal Transportation Fee \$
Weight 13 lbs.	Sunday/Holiday Premium Fee \$	Total Postage & Fees \$ 28.30	
<input type="checkbox"/> Flat Rate	Acceptance Employee Initials MC		

## DELIVERY (POSTAL SERVICE USE ONLY)

Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature

LABEL 11-F, SEPTEMBER 2015

PSN 7690-02-000-9998

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■ For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.

■ \$100.00 insurance included.

termination notice Pg 103 of 108

## CUSTOMER USE ONLY

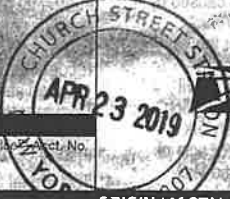
FROM: (PLEASE PRINT)

PHONE ( ) 212 267 4364

KOSSOFF, PLLC  
217 BROADWAY RM 401  
NEW YORK, NY 10007-2944



EF 204207200 US

UNITED STATES  
POSTAL SERVICE®PRIORITY  
★ MAIL ★  
EXPRESS™

## PAYMENT BY ACCOUNT (if applicable)

SPS® Corporate Acct. No.

Federal Agency Acct. No. or Postal Service Acct. No.

092004

## DELIVERY OPTIONS (Customer Use Only)

**SIGNATURE REQUIRED** Note: The mailer must check the "Signature Required" box if the mailer: 1) requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mailbox or other secure location without attempting to obtain the addressee's signature on delivery.

## Delivery Options

- ☐ No Saturday Delivery (delivered next business day)  
☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
\*Refer to USPS.com® or local Post Office™ for availability.

TO: (PLEASE PRINT)

PHONE ( )

John Shams  
220 Fifth Avenue  
New York, New York 10001

## ORIGIN (POSTAL SERVICE USE ONLY)

<input checked="" type="checkbox"/> 1-Day		<input type="checkbox"/> 2-Day		<input type="checkbox"/> Military		<input type="checkbox"/> DPO	
PO ZIP Code 10007		Scheduled Delivery Date (MM/DD/YY) 4/24/19		Postage \$ 25.50			
Date Accepted (MM/DD/YY) 4/23/19		Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input checked="" type="checkbox"/> 12 NOON		Insurance Fee \$		COD Fee \$	
Time Accepted 10:38		<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM		10:30 AM Delivery Fee \$		Return Receipt Fee \$ 2.80	
Weight 1 lbs. 14 ozs.		Sunday/Holiday Premium Fee \$		Total Postage & Fees \$ 28.30			
Flat Rate		Acceptance Employee Initials MS					

P + 4\* (U.S. ADDRESSES ONLY)

1 0 0 0 1

For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
\$100.00 insurance Included.

## DELIVERY (POSTAL SERVICE USE ONLY)

Delivery Attempt (MM/DD/YY)	Time	Employee Signature
	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt (MM/DD/YY)	Time	Employee Signature
	<input type="checkbox"/> AM <input type="checkbox"/> PM	

LABEL 11-F, SEPTEMBER 2015

PSN 7690-02-000-9998

2-CUSTOMER COPY

TER USE ONLY (PLEASE PRINT) PHONE ( ) 212 267 6364

SSOFF, PLLC  
7 BROADWAY RM 401  
W YORK, NY 10007-2944



EF 204207213 US

UNITED STATES  
POSTAL SERVICE

PRIORITY  
★ MAIL ★  
EXPRESS™

BY ACCOUNT (if applicable)

Corporate Acct. No. Federal Agency Acct. No. or Postal Service™ Acct. No.

2004

Y OPTIONS (Customer Use Only)

**SIGNATURE REQUIRED** Note: The mailer must check the "Signature Required" box if the mailer: 1) addresses the signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's box or other secure location without attempting to obtain the addressee's signature on delivery.

☐ Saturday Delivery (delivered next business day)  
☐ Holiday Delivery Required (additional fee, where available)  
☐ 10 AM Delivery Required (additional fee, where available)  
or to USPS.com® or local Post Office™ for availability.

VE PRINT) PHONE ( )  
Opinion Club Ventures LLC  
2 Fifth Avenue  
W York, New York 10001

S. ADDRESSES ONLY

0001-  
up or USPS Tracking™, visit USPS.com or call 800-222-1811.  
Insurance included.

ORIGIN (POSTAL SERVICE USE ONLY)

<input checked="" type="checkbox"/> 1-Day	<input type="checkbox"/> 2-Day	<input type="checkbox"/> Military	<input type="checkbox"/> DPO
PO ZIP Code 10007	Scheduled Delivery Date (MM/DD/YY) 4/24/19	Postage \$ 25.50	
Date Accepted (MM/DD/YY) 4/23/19	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input checked="" type="checkbox"/> NOON	Insurance Fee \$	COD Fee \$
Time Accepted 10:40 AM	10:30 AM Delivery Fee \$	Return Receipt Fee \$ 2.80	Live Animal Transportation Fee \$
Weight 1 lbs. 14 ozs.	Sunday/Holiday Premium Fee \$	Total Postage & Fees \$ 28.30	
	Acceptance Employee Initials MS		

DELIVERY (POSTAL SERVICE USE ONLY)

Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature

LABEL 11-F, SEPTEMBER 2015

PSN 7690-02-000-9958

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CUSTOMER USE ONLY

FROM: (PLEASE PRINT)

19-11231-mew

Doc 21-14

Filed 06/24/19

Entered 06/24/19 19:30:03

Landlords

termination notice Pg 105 of 108

EF 204207227 US

KOSSOFF, PLLC  
217 BROADWAY RM 401  
NEW YORK, NY 10007-2944



UNITED STATES  
POSTAL SERVICE®

PRIORITY  
★ MAIL ★  
EXPRESS™

## PAYMENT BY ACCOUNT (If applicable)

USPS® Corporate Acct. No.

Federal Agency Acct. No. or Postal Service™ Acct. No.

092004

## DELIVERY OPTIONS (Customer Use Only)

☐ **SIGNATURE REQUIRED** Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.

## Delivery Options

- ☐ No Saturday Delivery (delivered next business day)  
☐ Sunday/Holiday Delivery Required (additional fee, where available)  
☐ 10:30 AM Delivery Required (additional fee, where available)  
\*Refer to USPS.com or nearest Post Office for availability.

TO: (PLEASE PRINT)

PHONE ( )

Scorpion Fitness, Inc.  
220 Fifth Avenue  
New York, New York 10001

ZIP + 4® (U.S. ADDRESSES ONLY)

- 1 0 0 0 1 -  
■ For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
■ \$100.00 insurance included.

## ORIGIN (POSTAL SERVICE USE ONLY)

<input checked="" type="checkbox"/> 1-Day	<input type="checkbox"/> 2-Day	<input type="checkbox"/> Military	<input type="checkbox"/> DPO
PO ZIP Code 10007	Scheduled Delivery Date (MM/DD/YY) 4/24/19	Postage \$ 25.50	
Date Accepted (MM/DD/YY) 4/22/19	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input checked="" type="checkbox"/> NOON	Insurance Fee \$	COD Fee \$
Time Accepted 10:27	<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Return Receipt Fee \$ 2.80	Live Animal Transportation Fee \$
Weight 1 lbs. 1 oz.	10:30 AM Delivery Fee \$	Sunday/Holiday Premium Fee \$	Total Postage & Fees \$ 28.30
Rate 1ms	Acceptance Employee Initials ms		

## DELIVERY (POSTAL SERVICE USE ONLY)

Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature

LABEL 11-F, SEPTEMBER 2015

PSN 7690-02-000-9999

2-CUSTOMER COPY

**UNITED STATES**  
**POSTAL SERVICE**  
Certificate Of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing.  
This form may be used for domestic and international mail.

To pay fee, affix stamps or meter postage here  
B10585.20  
\$1.45  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

From: Kossoff, PLLC  
217 Broadway – Suite 401  
New York, NY 10007

To: Scorpion Fitness, Inc.  
88 Lexington Ave., Ste. 9D  
New York, New York 10016



PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES**  
**POSTAL SERVICE**  
Certificate Of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing.  
This form may be used for domestic and international mail.

To pay fee, affix stamps or meter postage here  
B10585.17  
\$1.45  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

From: Kossoff, PLLC  
217 Broadway – Suite 401  
New York, NY 10007

To: John Shams  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016



PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES**  
**POSTAL SERVICE**  
Certificate Of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing.  
This form may be used for domestic and international mail.

To pay fee, affix stamps or meter postage here  
B10585.19  
\$1.45  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

From: Kossoff, PLLC  
217 Broadway – Suite 401  
New York, NY 10007

To: Scorpion Club Ventures LLC  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016



PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES**  
**POSTAL SERVICE**  
Certificate Of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing.  
This form may be used for domestic and international mail.

To pay fee, affix stamps or meter postage here  
B10585.21  
\$1.45  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

From: Kossoff, PLLC  
217 Broadway – Suite 401  
New York, NY 10007

To: Scorpion Club Ventures LLC  
88 Lexington Ave., Ste. 9D  
New York, New York 10016



PS Form 3817, April 2007 PSN 7530-02-000-9065

**UNITED STATES POSTAL SERVICE** Certificate of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing. This form may be used for domestic and international mail.

From:

To payee, affix stamps or meter postage here. **Stamps**

**\$1.450**  
US POSTAGE  
FIRST-CLASS  
062S0007861483  
10007

B10586.06

Postmark Here

Kossoff, PLLC  
217 Broadway – Suite 401  
New York, NY 10007

To: Scorpion Club Ventures LLC  
220 Fifth Avenue  
New York, New York 10001

PS Form 3817, April 2007 PSN 7530-02-000-9065



**UNITED STATES POSTAL SERVICE** Certificate of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS® for mailing. This form may be used for domestic and international mail.

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Kossoff, PLLC  
217 Broadway – Suite 401  
New York, NY 10007

To: Scorpion Fitness, Inc.  
325 Fifth Avenue, Ste. 41E  
New York, New York 10016

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Kossoff, PLLC  
217 Broadway – Suite 401  
New York, NY 10007

To: Scorpion Fitness, Inc.  
220 Fifth Avenue  
New York, New York 10001

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Kossoff, PLLC  
217 Broadway – Suite 401  
New York, NY 10007

To: John Shams  
220 Fifth Avenue  
New York, New York 10001

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**UNITED STATES  
POSTAL SERVICE**

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Mailing**

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10007**

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To: John Shams

88 Lexington Ave., Ste. 9D

New York, New York 10016

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